

# Silverton CPA/GPA



Caring through vigilance and participation  
Omgee deur paraatheid en betrokkenheid

## SILVERTON COMMUNITY PATROL ASSOCIATION/SILVERTON/GEMEENSKAP-PATROLLIE ASSOSIASIE

**SIGNUP FORM (Item 12 of the constitution of the Silverton CPA)**  
**AANSOEK VORM (Item 12 van die Grondwet van die Silverton GPA)**

**ENROLMENT TO USE RADIO NETWORK (Item 34 (a))**  
**REGISTRASIE VIR GEBRUIK RADIO NETWERK (Item 34(a))**

**(Information supplied will be treated as strictly confidential)**  
**(Inligting hier verskaf sal streng vertroulik behandel word)**

A household who wants to become a member of the Silverton Community Patrol Association(GPA) must complete this form and submit it to the Association, accompanied by the appropriate fees./n Huishouding wat 'n lid van die Silverton Gemeenskap Patrollie-Assosiasie wil word, moet die vorm voltooi en aan die Lede beampte van die Assosiasie voorlê, tesame met die toepaslike fooi.

The purpose of this form is to create a database with all your details and personal information to be used for communication purposes and in an event of an emergency./Die doel van hierdie vorm is om 'n data basis met al u kontak- en persoonlike inligting daar te stel vir gebruik vir doeleindes van kommunikasie, asook in 'n noodgeval.

### 1. Contact Person/Skakel persoon Street Adress/Straat Adres

Name/Naam: .....

Surname/Van: ..... .

ID Nr/ID No: ..... Email/Epos: .....

Complex/Kompleks: ..... Unit/Eenheid .....

### Contact No/Kontak Nr

Cell No/SelffoonNr: .....

House No/Huis Nr: .....

Work No/Werk Nr: .....

Fax No/Faks Nr: .....

Other No/Ander Nrs: .....

### WhatsApp

CPA/GPA Crime/Misdaad	
CPA/GPA Municipal/Munisipale	
CPA/GPA Chat/Klets	

**2. Household members financially dependent on the contact person occupying the dwelling on the property, to be together with the contact person the participants referred to in item 14 of the constitution./Lede van die huishouding wat finansieel afhanglik is van die skakel persoon, inwonende op die eiendom, en tesame met die skakel persoon en deelnemers verwys na, in item 14 van die konstitusie.**

Surname/Van	Name/Naam	ID Nr/ID No	Tel Nr/Tel No	Email/Epos

**3. Medical Aid Details for contact person and direct family residing on the above property/Besonderhede van mediese fonds van skakel persoon sowel as direkte familie inwonend op bovemelde eiendom.**

Medical Aid/Mediese Fonds	
Hospital Plan/Hospital plan	
Private/Privaat	

**4. Details of person not residing on the property that can be contacted in the case of an emergency./Besonderhede van persone nie woonagtig is op bogenoemde eiendom, wat gekontak kan word in 'n noodgeval.**

Name of Person/ Naam van Persoon	Cell Nr/Other No/ Selfoon Nr/Ander	Physical Adress/ FisieseAdres	Relationship/ Verwantskap

**5. We can contribute to the CPA in one or more of the following manners/Ons kan op enige van die volgende wyses tot die GPA bydra.**

(PLEASE REMEMBER that this is a community service, limited to emergency situations in our area. Your service is accordingly voluntary and at own cost, responsibility and accountability, services rendered. Your service or actions are limited to the control of/or to secure the emergency situation until the relevant help arrives)/(ONTHOU ASSEBLIEF hierdie is n nooddiens in n nood toestand in ons gebied u diens is u eie verantwoordelikheid toerekenbaarheid en risiko. Verder is sodanige dienste gratis. U diens is beperk tot noodtoestand/toneel tot dat toepaslike hulp kan oorneem).

#### **PLEASE PROVIDE DETAILS/VERSKAF BESONDERHEDE**

#### **MANDATORY/NOODSAAKLIK**

Doctor/Dokter		
Medical Sister/Nurse/Mediese Suster		
Paramedic/Paramedics		
Fire Fighter/Brandweerkundige		
Advocate/Advokaat – Attorney / Prokureur		
Controller radio communication/Radio Beheer		
Patrol/Patrollie		
Zone Champion/Zone Kampioen		
Other		

#### 6. COMMUNICATION RADIO NETWORK/RADIO KOMMUNIKASIE NETWORK

Our household would like to make use of the communication radio network and is/will be in the position of the following radios/Ons huishouding wil graag gebruik maak van die radio kommunikasie network, en is in besit van/doen aansoek vir die volgende radios.

Name/Naam	Model/Model	Serial No/Reeks Nr

I further declare that the radios will be under the supervision and use of the following persons/Ek verklaar verder dat die radios onder die toesig van die volgende persone sal wees.

Surname/Van	Name/Naam

- a. I/We understand that the usage of the radio(s) is subject to the provisions of the Constitution of the CPA/Ons begryp dat die gebruik van die radio(s) onderworpe is aan die bepalings van die Konstitusie van die GPA.
- b. If any of the radios get lost or stolen or I replace it, we will inform the Member ship Official accordingly/As enige van die radions vermis of as ons dit vervang, sal die Lede Beampte sodanig ingelig word.
- c. We are aware of and will pay the annual license fee for my radio(s) as and when required/Ons is bewus van jaarlikse lisensie fooi vir die radio(s), en sal dit vereffen wanneer toepaslik.
- d. We declare that I do understand the radio procedure and that I and those who will make use of the radio(s) will not misuse the radio(s) in any way, and if the radio(s) is misused by me or any other person that gained access to the radios, the Silverton CPA has the right to disconnect us from the radio network or confiscate the radio In the interest of the safety of all the Silverton residents./Ons verklaar dat ons die radio prosedure begryp , en dat die radio(s) op geen tyd deur enige iemand misbruik sal word nie. Indien sodanige misbruik sou plaas vind deur enige persoon wat daar toe toegang verkry het, sal die Silverton GPA die reg he om ons van die radio network af te snou of die radios(s) te konfiskeer in belang van die veiligheid van die inwoners van Silverton.

#### 7. PATROLS AND RELATED ACTIVITIES/PATROLLIES EN VERWANTE BEDRYWIGHEDE

We the undersigned would like to participate in the patrol and related activities co-ordinated by the CPA./ Ons die ondergetekende(s) wil graag aan patrollies en verwante aksies soos deur die GPA gekoordineer deelneem.

Name/Naam	Surname/Van	Signature/Handtekening
.		

We understand that/Ons begryp dat:

- a. Taking part of the patrol and related activities is subject to the provisions of the CPA Constitution/Deelname aan patrolding en verwante aksie onderworpe is aan die voorwaardes van die GPA grondwet.
- b. The patrol and related activities are organised and controlled by volunteer members of the CPA/Patrolding en verwante aksies deur vrywillige lede van die GPA gereel en georganiseer word.
- c. The main purpose of patrolling is to be observing and reporting anything that looks suspicious to the relevant authorities, and to call on the assistance of the other members of the CPA when required/Die hoof doel van patrolding is om enige suspisieuse waar te neem en aan die relevante bestuur te rapporteer en om bystand van die GPA lede aan te vra indien nodig.
- d. No fees are charged from the community and no income is derived from these activities./Geen fooie van die gemeenskap gevra word n geen besoldiging is aan hierdie aksies verbonde nie.
- e. All costs like fuel, equipment and training for taking part in the activities are for our own account./Alle koste soos brandstof toerusting en opleiding in hierdie aksies vir eie rekening is .
- f. These activities are undertaken without any payment or compensation./Hierdie aksies sonder enige vergoeding of kompensasie verrig word.
- g. The activities will be undertaken by us entirely at own responsibility and accountability and risk and for our own cost, and the CPA cannot be held liable for any loss to life or property or expense or damage incurred from taking part in these activities./ Aksies deur ons geheel en al op eie verantwoordelikheid, toereken vatbaarheid en risiko onderneem word, en dat die GPA nie aanspreeklik gehou kan word vir enige verlies aan lewe, eiendom, onkoste of skade wat ontstaan as gevolg van deelname aan hierdie aktiwiteite nie.
- h. It is our duty and responsibility to adhere to all the laws and by-laws of the Republic of South Africa at all times while patrolling and/or performing duties for the Silverton CPA Patrols/Dit ons verantwoordelikheid is om aan alle wette en ordonansies van die Republiek van Suid Afrika te voldoen terwyl ons patroleer en/of aksies vir die Silverton GPA.Patrolie dienste verrig.
- i. We are free to resign in writing from all patrolling duties at any time with immediate effect./Dit ons enige tyd vry staan om teen enige tyd skriftelik van enige patrolije diens te bedank, met onmiddelike effek.

## **8. DECLARATION / VERKLARING**

I will act as the contact person for this household/Ek tree op as die skakel person vir hierdie huishouding.

I have discussed the contents of this document with the members of the household applying for registration (i.e.my family and partner (if applicable) (here in after referred as we) and we are familiar with the contents thereof and understand the implications thereof./Ek het die inhoud van hierdie document bespreek met lede van die huishouding wat hier om registrasie aansoek doen (te wete my familie en gesin (indien van toe passing), hierna verwys as ons) en ons is bekend met die inhoud daarvan en begryp die implikasies.

We understand that the membership of the Association is subject to the provisions of the Constitution of the Association and declare and undertake that/Ons verstaan dat lidmaadskap van die Assosiasie onderworpe is aan die bepaling van die Konstitusie van die Assosiasie, en verkaar en onderneem:

- a. We will take part in the activities of the CPA on a voluntary basis./Om aan die aksies van die die GPA op vrywillige basis deel te neem.
- b. We will participate in the activities of the CPA as and where possible/Om aan die aksies van die GPA deel te neem soos en waar moontlik.
- c. We will not be entitled to any remuneration if we take part in any of the activities of the CPA as this is necessary to achieve the aims of the CPA/Dat ons nie op enige vergoeding aanspraak het wanneer ons aan enige aktiviteite van die GPA deelname soos nodig om die doelwitte van die GPA te bereiknie.
- d. We will be active members of the CPA in word, eye and action/Om in woord, waarneming en aksie aktiewe lede van die GPA te wees.
- e. We will attend meetings as and when necessary as well as training sessions offered by the CPA/Om vergaderings sowel as opleidings sessies deur die GPA aangebied by te woon soos en wanneer nodig.
- f. We will not participate in any action of the CPA in any manner what so ever that will cause unnecessary damage or injury to any person or property./Dat ons nie aan enige aksie van die GPA sal deelneem op n wyse wat ons enige beserings aan enige person, eiendom sal veroorsaak nie.
- g. We will not hold the Association liable for any loss to life or property or expense or damage incurred in the discharge of or arising from the exercising of any of the functions or activities under the Constitution/Om nie die Assosiasie aanspreeklik te hou vir enige verleis aan lewe, eiendom, uitgawes, skade op gedoen weens enige aksies deur of weens uitoefen van enige aksies binne die konsitusie.
- h. If any member if the CPA responds to our emergency cry or call and we sustain any injury, damage or loss in person or property, which includes all persons and property on the address specified above, neither the Association or the person(s) that responded to cry or call will be held liable for such damage or loss./om, waar enige lid van die GPA op 'n noodoproep reageer, en enige besering, skade of verlies aan lewes of eiendom op die bovemelde adres ontstaan, insluitende alle persone en eiendom op bovemelde eiendom se adres, nie die Assosiasie of die persone wat op die nood roep gereageer het, aanspreeklik vir sodanige skade of verlies te hou nie
- i. We will pay the future annual membership fees as and when due/om die toekomstige Jaarlikse lidmaatskap geld en wanneer verskuldig te betaal.

**9. I HEREBY GRANT SILVERTON CPA PERMISSION TO ACCESS MY PROPERTY IN CASE OF AN EMERGENCY./ HIERMEE GEE EK MY TOESTEMMING VIR TOEGANG TOT MY EIENDOM AAN DIE SILVERTON GPA IN N NOOD SITUASIE.**

<b>YES/JA</b>	<b>NO/NEE</b>
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**SIGNED/GETEKEN AT/TE PRETORIA ON/OP ..... DAY/DAG/OF/VAN ..... 20.....**

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**SILVERTON CPA/GPA**

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**CONTACT PERSON/KONTAK PERSOON**