

Silverton CPA/GPA



Caring through vigilance and participation
Omgee deur paraatheid en betrokkenheid

SILVERTON COMMUNITY PATROL ASSOCIATION SILVERTON/GEMEENSKAP-PATROLLIEASSOSIASIE

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)]

ENROLMENT FOR PATROL ACTIVITIES (Item 34(a) /REGISTRASIE VIR PATROLLERING [Item 34(a)]

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

A household who wants to become a Member of the Silverton Community Patrol Association (CPA) must complete this form and submit it to the Membership Official of the Association, accompanied by the appropriate fees.

'n Huishouding wat 'n lid van die Silverton Gemeenskap Patrollie-Assosiasie wil word, moet hierdie vorm voltooи en aan die Lede beampie van die Assosiasie voorle, tesame met die toepaslike fooi.

The purpose of this form is to create a database with all your contact 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 doeleindest van kommunikasie, asook in 'n noodgeval.

1. Contact Person/Skakel persoon:

Initials & Surname/Voorletters & Van:

Street Address/Straat Adres: Complex/Kompleks/Unit/Eenheid

.....

.....

.....

.....

ID Nr/ID No:

Email:E-pos: Fax: No/Faks No:.....

Cell No/Selffoon no: House Tel no/Huis Tel No:

Work Tel No/Werk Tel No: Other No/Ander No:

WhatsApp Groups/ WhatsUp Groepe

| | |
|------------------------------|--|
| CPA/GPA Crime/Misdaad | |
| CPA/GPA Municipal/Munisipale | |
| CPA/GPAN Chat/Klets | |
| Telegram | |

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 huishouding wat afhanglik is van die skakel persoon, inwonend 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/D 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 bo vermelde eiendom

| | |
|------------------------------|--|
| Medical Aid/Mediese Fonds | |
| Hospital plan/Hospitaal plan | |
| Private/Privaat | |

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

| Name of Person/Naam van persoon | Cell Nr Other No/Sel no/ander | Physical Address/Fisies eadres | 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 your own cost, responsibility and accountability, service 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 nooddienst tot nood toestand in ons gebied U diens is verantwoordelikheid toerekenbaarheid en risiko. Verder is sodanige dienste gratis. U diens is beperk tot noodtoestand/ toneel todat toepaslike hulp kan oorneem.

PLEASE PROVIDE DETAILS/VERSKAF BESONDERHEDE

MANDATORY/NOODSAAKLIK

| | |
|--|--|
| Doctor/Dokter | |
| Medical Sister/Nurse/Medies Sister | |
| Paramedic/Paramedics | |
| Fire Fighter/Brandweerkundige | |
| Advocate/Attorney | |
| Controller: radio communication/Radio beheer | |
| Patrol/Patrollie | |
| Zone Champs/Zone Kampioen | |
| Other | |

6. COMMUNICATIION RADIO NETWORK/RADIO KOMMUNIKASIE NETWERK

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

| Name/Naam | Model | Serial No/Reeks no |
|-----------|-------|--------------------|
| | | |
| | | |

- a. I/We understand that the usage of the radio(s) is subject to the provisions of the Constitution of the CPA/Ek/ons begryp dat gebruik van die radios 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 membership Official accordingly/As enige van die radios vermis of as ek/ons dit verangsal 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; Ek/ons bewus van jaarlikse lisensiefoo ivir 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 radio, 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 Silverton Residents. Ek/ons verklaar dat dit radio procedure begryp word, 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 daartoe toegang verkry het, sal die Silverton GPA die reg he om my/ons van die radionetwerk af te sny of die radio(s) te konfiskeer in belang van die veiligheid van die inwoners van Silverton.

7. PATROLS AND RELATED ACTIVITIES/PATROLLIES EN VERWANTE BEDRYWIGHEDE

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

| Name | Surname | Signature |
|------|---------|-----------|
| | | |
| | | |
| | | |

I/We understand that/Ek/Ons begryp dat:

- a. Taking part in the patrol and related activities is subject to the provisions of the CPA Constitution/Deelname aan patroldring en verwante aksie onderworpe is aan die voorwaardes van die GPA-konsitusie
- b. The patrol and related activities are organized and controlled by volunteer members of the CPA/Patrolering en verwante aksies 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 patroldring is om enige suspisieuswaarde neem en aan die relevante bestuur te rapporteer en om n bystand van die GPA lidt aan te vra indien nodig.

- d. No fees are charged from the community and no income is derived from these activities/Gee fooie van die gemeenskap gevra word n geen besloldiging aan hierdie aksies verbonde is 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 our 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 ordonnansies van die Republiek van Suid Afrika te voldoen terwyl ons patroleer en/of aksies vir die Silverton GPA patroli diens verrig.
- i. We are free to resign in writing from all patrolling duties at any time with immediate effect/Dit ons enige tyd vrystaan om teen enige tyd skriftelike van enige patroli dienste te bedank, met onmiddelike effek

8. DECLARATION /VERKLARING

I will act as the contact person for this household/ Ek tree op as die skakel persoon 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) (hereinafter referred to as we) and we are familiar with the contents thereof and understand the implications thereof/Ek het die inhoud van hierdie dokument bespreek met lede van die huishouding wat hier om registrasie aansoek doen te wete my familie en gesel (indien van toepassing), hierna verwys as 'ons' en ens 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 lidmaatskap van die Assosiasie onderworpe is aan die bepalings van die Konstitusie van die Assosiasie, en verklaar en onderneem:

- a. We will take part in the activities of the CPA on a voluntary basis/ Om aan die aksies an die GPA op vrywillige basis deelte 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 aktiwitete van die GPA deelname soos nodig om die doelwitte van die GPA te bereik nie.
- d. We will be active members of the CPA in word, eye and action/Om in woord, waarneming en aksie aktiewelede van die GPA wees.
- e. We will attend meetings as and when necessary as well as training sessions offered by the CPA/Om vergaderings sowel as opleiding sessies deur die GPA aan gebied by te woon soos en wanneer nodig.

- f. We will not participate in any action of the CPA in any manner whatsoever that will cause unnecessary damage or injury to any person or property/dat ons nie aan enige aksie van die GPA sal deel neem op n wyse wat onnodige beserings aan enige persoon, 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 verlies aan lewe, eiendom, uitgawes, skade op gedoen weens enige aksies deur of weens uitgeoefen van enige aksies binne die konstitusie
- h. If any member of 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 property at the address specified above, neither the Association or the person(s) that responded to the cry or call will be held liable for such damage or loss/ om, waarenige lid van die GPA op ens nood oproep reageer, en enige besering, skade of verlies aan lewes of eiendom op die bo vermelde adres ontstaan, insluitende alle persone en eiendom op bovermelde eiendom se adres, nie die Assosiasie of die persone wat op die noodroep gereageer het, aanspreeklik vir sodanige skade of verlies te hou nie
- i. We will pay the future annual membership fees R_____ as and when due/ om die toekomstige jaarlikse lidmaatskap gelde R_____ en wanneer verskuldig te betaal.
- j. **Bank Details/Bank Besonderhede:** FNB ACCOUNT NO:62269507441, REF NO: SIGNAL NAME (EG: THEA2)
- k. **I HEREBY GRANT THE SILVERTON CPA PERMISSION TO ACCESS MY PROPERTY IN CASE OF AN EMERGENCY/HIERMEE GEE EK TOESTEMMING AAN DIE SILVERTON CPA VIR TOEGANG TOT ONS EIENDOM IN N NOOD SITUASIE.**

YES/JA

NO/NEE

Signed/Geteken at/ te Pretoria op/onday/dag/of/van 202....

SILVERTON CPA/GPA

CONTACT PERSON/KONTAKPERSOON