



# COMMUNITY PATROLS OF NEW ZEALAND QUICK REFERENCE FORM

	<b>Date</b>	
<b>Patrol Name</b>		
<b>Current number of Patrollers</b>		<b>Home Station</b>
<b>Call Sign</b>		<b>Cellular Phone</b>

**ID cards**

<b>Please indicate to whom ID cards should be sent</b>	<b>Patrol Leader 1 or 2</b>		<b>Secretary</b>		<b>Training Officer</b>	
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**Patrol Leader 1**

<b>Name</b>			
<b>Addr:</b>			
<b>Home</b>		<b>Work</b>	
<b>Cell</b>		<b>Email</b>	

**Patrol Leader 2**

<b>Name</b>			
<b>Addr:</b>			
<b>Home</b>		<b>Work</b>	
<b>Cell</b>		<b>Email</b>	

**Secretary**

<b>Name</b>			
<b>Addr:</b>			
<b>Home</b>		<b>Work</b>	
<b>Cell</b>		<b>Email</b>	

**Training Coordinator**

<b>Name</b>			
<b>Addr:</b>			
<b>Home</b>		<b>Work</b>	
<b>Cell</b>		<b>Email</b>	

**Police Liaison Officer**

<b>Name</b>		<b>Station</b>	
<b>Cell</b>		<b>Email</b>	
<b>QID</b>		<b>Work</b>	

**Email to: [database@cpnz.org.nz](mailto:database@cpnz.org.nz)**