

South Central Alberta Rural (SCAR) Crime Watch Association



APPLICATION FOR MEMBERSHIP

* Please print clearly *

Last Name:			
First Name(s):			
Mailing Address:			_
Town:		Postal Code:	
Home Phone:		Cell Phone:	
E-mail Address:			
Legal Land Description (Range Road / Township Road):			
Fan out area: Taber Vauxhall RCMP Detachment			
in order to maintain the Association only. I a	he integrity of the progree to remove all	ogram, Rural Crime Wat	e surrendered. I understand that the signs are for members of the m my property and notify SCAR perty.
Applicant Signature		Date	
South Central Alberta Mail or drop off cheq South Central Albe System. It is highly	a Rural Crime Watch ue and application to erta Rural Crime or recommended that	watch is in partners at all members sign up	iness payable to Taber, AB T1G 1T2 hip with SCAR Notification online at www.scarnotify.ca n the area and your local
Office Use Only			
☐ Sign provided	Membership Paid (da	ate):	Invoice #