



CITIZEN'S PATROL

Team: _____

Windcrest Citizen's Patrol Membership Application

Full Name: _____
Last First Middle

Address: _____
Street Address Apartment/Unit #

(must be Windcrest resident) Windcrest TX
City State ZIP Code

Home Phone: (____) _____ Cell Phone: (____) _____

E-mail Address: _____

Marital Status: _____ Spouse's Name: _____

Current Drivers License Number: _____ State Issuing Drivers License: _____

Have you ever been arrested or convicted of a crime? (circle one) **Yes** **No**

(if "Yes" explain): _____

Do you possess a Concealed Handgun License? Yes / No License # _____ Expires: _____
(Possession of weapons in a City vehicle is not authorized)

I understand I must reside in the city of Windcrest to be eligible for membership in the Windcrest Citizens Patrol.

I hereby grant permission for the Windcrest Police Department to conduct a NCIC/TCIC check. (National Crime Information Center / Texas Crime Information Center) I am also aware that deliberately omitting or falsifying this application will be grounds for disqualification / dismissal from this program. If accepted into the program I also agree to maintain the confidentiality of any information involving any ongoing criminal investigation, police operations, arrest warrants, or criminal indictments while volunteering for the Windcrest Citizens Patrol.

If I am involved in an accident with the Windcrest Citizens Patrol car I consent to a urine test.

Signature: _____ **Date:** _____

*****For Police Department Use Only*****

TCIC/NCIC Check: _____ Driver's License Check: _____ Date: _____ By: _____

TLO: _____ Date: _____

Approved **Yes** **No**

Print Name Title Signature Date

If not approved, state reason: _____

