

Kilve Neighbourhood Watch Scheme Registration details

I wish to be a member of Kilve Neighbourhood Watch (KNW) Scheme and consent for my details to be used for KNW purposes. My details are below.

Title/Name: _____

Address: _____

Post Code: _____

Email Address: _____

Telephone Number (Optional): _____

Mobile: _____

Date: _____

*Please Note: If you do not return this form you will not be included in the scheme and therefore will not receive Police Alerts or our Newsletter.
All information will be held securely.*