



BLOCK WATCH

TEAM PARTICIPANT LIST

We the undersigned wish to participate in the Block Watch Program. Permission is hereby given to provide the Crime Prevention Unit with my name, address, phone number, and e-mail (Unlisted phone numbers may be withheld if desired). The Block Watch Program does not disseminate, share, or distribute this information to anyone and will remove the information at my request.

By agreeing to participate in the Block Watch Program, I agree to have my personal information placed on a team block map, which is shared with the Crime Prevention Unit and Block Watch participants in my neighborhood. Captains will respect the privacy and confidentiality of participating households who do not wish to share their personal information. If I choose not to share my personal information, I will advise the Block Watch Captain.

Personal information collected on this form is in accordance with s. 26(c) of the Freedom of Information and Protection of Privacy Act (RSBC 1996) for the administration of the Block Watch Program and Crime Prevention Initiative in the City of Burnaby. Please be advised that your personal information will be managed and protected in accordance with this Act. For questions regarding the collection, use and disclosure of your personal information, please contact the Manager Crime Reduction and Intervention at blockwatch@burnaby.ca or by calling 604-294-7795 or in person at Community Safety - City Hall at 4949 Canada Way, Burnaby.

Captain:

Block Watch Number:

Address:

Date:

Unit #	Street Address	Surname, First name	Phone #	Email	Signature



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Unit #	Street Address	Surname, First name	Phone #	Email	Signature

