



MEMPHIS POLICE DEPARTMENT

Emergency Communications Bureau
CityWatch Community Messaging
79 South Flicker Street
Memphis, TN 38104



CITYWATCH ENROLLMENT FORM

To become a member in the CityWatch Program, please complete the following form and return by mail. The information you provide will be held in confidence. Please print and make letters/numbers as legible as possible. E-mail addresses must be as plain as possible since they often follow no guidelines and are impossible to guess at.

RESIDENCE OR BUSINESS NAME: _____

ADDRESS: _____

PRIMARY TELEPHONE NUMBER: _____

SECONDARY TELEPHONE NUMBER: _____

ALTERNATE TELEPHONE NUMBER: _____

E-MAIL ADDRESS: _____

CLOSEST INTERSECTING STREETS TO YOUR ADDRESS:

IF YOU ARE IN A NEIGHBORHOOD WATCH GROUP, WHAT IS THE NAME OF THE GROUP? _____

WHAT BUSINESS GROUP ARE YOU LOCATED IN? IE: POPLAR PLAZA, LAURELWOOD, RALEIGH SPRINGS, ETC. _____