NSNZ MEMBERSHIP FORM

NAME OF ORGANISATION	**Dargaville Community Development Board**	
NAME OF NOMINATED PERSON *This is the person who will be your official representative for the purposes of voting and receiving information*	**NAME: Sue Curtis** **EMAIL: suec@dcdb.nz** **PHONE: 027 241 6380**	
YOUR ORGANISATION'S LEGAL ENTITY *Please highlight or tick the option for your organisation*	○ **Charitable Trust** ○ **Incorporated Society** ○ **Trust** ○ **Other e.g. Local Government Authority**	
REGISTERED CHARITY *Is your organisation a registered charity?*	○ **Yes** ○ **No** **If yes, what is your Charity number? CC_56676**	
POLICE LIASION OFFICER *Who is the local Police contact you work directly with?* *If there is more than one, please name the Officer you work with most*	**NAME: Reuben Cohen (Reuben Cohen is our liaison for CCTV)** **EMAIL: Reuben.Cohen@police.govt.nz** **PHONE:**	
GOVERNING BODY MEMBERS*What are the names and roles (e.g. Chairperson, Treasurer) of all of the people on your organisation's Committee or Board?* *If your organisation is a Local Government Authority, you do not need*	**NAME:**	**ROLE:**
	Joanna Ewenson	**Chair**
	Joseph Douglas	**Treasurer**
	Roxanne Kelly	**Committee**
	Reuben Cohen	**Committee**
	Nigel Corbett	**Committee**

to complete this section	**Henry Kemp**	**Committee**
	Rodney Hannell	**Committee**
VOLUNTEERS *What are the names and roles of all of the people who volunteer for your organisation (excluding the Board or Committee members) who meet*	**NAME:**	**ROLE:**
	None	

NSNZ requirements to be vetted (i.e. volunteers who work in a Neighbourhood Support office or Police premises and/or have access to an area's NS database and/or work with children in a NS capacity)? This does not include Street Contacts.			
EMPLOYEES *What are the names and job titles of the people who work in a paid Neighbourhood Support role for your organisation?*	**NAME:**	**JOB TITLE:**	**HOURS WORKED FOR NS:**
	Sue Curtis	**Office Manager**	
COMMUNICATIONS LIST *Are there any other people in your organisation you would like us to add to our weekly pānui distribution list?*	**NAME:**	**EMAIL:**	
	None		