



**GENERAL MEMBER APPLICATION**

Please complete this form and return it along with a cheque for CI\$10 made payable to *Cayman Crime Stoppers* to:

Cayman Crime Stoppers,  
c/o Kerry Pratt, Cayman Islands Chamber of Commerce,  
P.O. Box 1000 | Grand Cayman KY1-1102 | CAYMAN ISLANDS

Physical Address: Macdonald Square, 2nd Floor, Fort Street, George Town

Please direct application queries only to: [kerry.pratt@caymanchamber.ky](mailto:kerry.pratt@caymanchamber.ky)

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
(First) (Middle) (Last)

**Date of Birth (DD/MM/YY):** \_\_\_\_\_

**D/L Jurisdiction/Number:** \_\_\_\_\_

**Passport Country/Number:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email:** \_\_\_\_\_



Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer Mailing Address: \_\_\_\_\_

Employer Phone: \_\_\_\_\_ Employer Fax: \_\_\_\_\_

**Please include me on circulation of SMS and email crime-alerts and general CCS communications:**

Please tick

I/We enclose my/our check for CI\$10 for membership dues.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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***(Do not write below this line)***

Membership Approved

Signature: \_\_\_\_\_

Date: \_\_\_\_\_  
(Chairman)