

# 2021 NEW MEMBER APPLICATION (Law Enforcement active/retired, non-associate)

Please complete ALL areas and print LEGIBLY

LAST NAME , FIRST NAME  M.I.

YOUR DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_

[ BENEFICIARY NAME & DOB (List Only 1 Name) \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ ]

[ Relationship to Member \_\_\_\_\_ Beneficiary Contact Phone #: \_\_\_\_\_ ]

Member's Religious Affiliation (Optional; Bereavement Use Only) \_\_\_\_\_

▶ **CONTACT INFORMATION:**

E-Mail Address: [Please print neatly....E-mails utilized to advise of notices/events] \_\_\_\_\_

Street Address: \_\_\_\_\_ Apt/Floor/Unit #: \_\_\_\_\_

Borough/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

**Facebook! Find Us At: FOP NY Lodge 38**

▶ **LAW ENFORCEMENT OCCUPATION:**

Still Working?  Retired? Date Retired: \_\_\_\_\_

Department/Agency: \_\_\_\_\_ Command / Unit: \_\_\_\_\_ Phone: \_\_\_\_\_

▶ **TELL US ABOUT YOURSELF:**

How did you hear about the FOP?  Referred by another FOP Member: (name) \_\_\_\_\_  Internet  Poster/Flyer  Publication

Have you ever been a member of the FOP?  No  Yes, what State & Lodge # \_\_\_\_\_ What year? \_\_\_\_\_ Member # \_\_\_\_\_

*(Please note: You may **NOT** belong to 2 FOP lodges, regardless of location, at the same time. Transfers can only take place during the Autumn renewal period)*

What other Fraternal Organizations do you belong to? \_\_\_\_\_

What type of events would you suggest we hold? \_\_\_\_\_

List any special skills, resources or contacts that you can offer to help the lodge: \_\_\_\_\_

▶ **MEMBERSHIP FEE:** (effective Sept 1<sup>st</sup>, 2017) **\$55.00** for new members or lapsed members that rejoin, due upon application, which entitles the member to any and all national, state & local lodge mailings, as well as membership benefits, a card & decal, and the opportunity to participate in professional/social functions.

**Make checks/money orders in the amount of \$55.00 payable to:** "FOP NY Lodge 38". *Membership eligibility will be confirmed prior to acceptance.*

**REMIT complete & signed application to:** "FOP NY Lodge 38 Membership Committee", P.O. Box 38, Middle Island, NY 11953.



You **MUST** enclose a b/w photocopy of your LEO I.D. or a status confirmation letter on department/agency letterhead or your application will be returned....no exceptions!

SIGNATURE/DATE REQUIRED: \_\_\_\_\_ Date: \_\_\_\_\_

**LODGE SECRETARY USE ONLY ▶** Date Rcvd: \_\_\_\_\_ Amt Rcvd: \_\_\_\_\_ I.D.: \_\_\_\_\_ STATE LODGE W- \_\_\_\_\_