APPLICATION FOR ASSOCIATE MEMBERSHIP

GROSSE POINTE LODGE #102 FRATERNAL ORDER OF POLICE

I the undersigned, hereby make application to join Grosse Pointe Lodge #102 Fraternal Order of Police Associates and hereby state that I have attained the age of 21 years and are a citizen of good repute of the United States of America. I further swear that I am not and have not been convicted of a felony and never have been a member of any subversive or Un-American organization. I AGREE, if found qualified, to abide by all the laws, rules, regulations of the Lodge and that the Decal. Membership Card, Emblem, are the property of the lodge and can be recalled for misuse or non-payment of dues or other valid reasons deemed appropriate by the Executive Board.

PERSONAL INFORMATION: **(Please Print)**

Name _____ Email _____
First MI Last

Address _____ Home Phone _____
City _____ State _____ Zip _____

Birth Date _____ Cell Phone # _____ Business Phone # _____

Employer _____ Position _____ Nature of Business _____

Have you been previously proposed for membership in this or any other FOPA Lodge? Yes _____ No ____

If Yes (Date) _____ Lodge _____ Accepted _____ Rejected _____

DUES PRORATION: (Month Of Application)

Jan - 68 Feb - 64 Mar - 60 Apr - 56 May - 52
Jun - 48 Sep - 36 Oct - 32 Nov - 76* Dec - 72*
*(Includes dues for following year)

I enclose my payment of $_____ to cover application fee and PRORATED DUES through December 31 of this year. I understand that the annual dues are **$48.00** and are payable in January each year hereafter.

Applicants Signature _____ Date of Application _____

To be completed by Sponsor: How long have you known Applicant? _____ Opinion of Applicant _____

_____

Sponsors Name _____ Signature _____ Date _____

The undersigned Members of Lodge #102 recommend this applicant for admission in the Associate Lodge.

FOPA	FOP
Date _____ _____	Date _____ _____
Date _____ _____	Date _____ _____

FOPA Membership Committee Action: Accept App ___ Reject ___ Date _____ Reason_____

Posted _____ FOPA Membership Action: Accept ___ Reject ___ Date _____

Check # or Cash _____ Letter, Card & Roster Sent ___ 02/17