

**APPLICATION - 10/24/2009**  
**NEW YORK STATE FRATERNAL ORDER OF POLICE LODGE #911**  
**349 Stewart Ave., Garden City, NY 11530**

FILL OUT ON SCREEN, TYPE OR PRINT (Tel. 631-306-1050) - Application forms prior to 10/24/2009 are Voided

ALL APPLICATIONS FOR **ACTIVE MEMBERSHIP** REQUIRE FULL TIME EMPLOYMENT OR RETIREMENT FROM A LAW ENFORCEMENT AGENCY, WITH POLICE, OR PEACE OFFICER STATUS AS PER NYS STATUTE.

FULL LEGAL NAME.....  
 ADDRESS (APT#,ETC.).....  
 CITY/STATE/ZIP+4.....  
 DATE OF BIRTH.....E-MAIL ADDRESS.....  
 HOME PHONE (        ).....WORK PHONE (        ).....  
 AGENCY OR EMPLOYER.....TITLE/RANK.....  
 ADDRESS.....CITY.....STATE.....ZIP.....  
 PRESENTLY WORKING YES.....NO.....RETIREMENT DATE.....  
 BENEFICIARY INFORMATION: NAME.....RELATIONSHIP.....

REFERENCES: (ASSOCIATES ONLY IF NOT SPONSORED)

1. NAME..... Tel.# .....  
 ADDRESS..... CITY.....STATE.....ZIP.....  
 2. NAME..... Tel.# .....  
 ADDRESS..... CITY.....STATE.....ZIP.....

HAVE YOU EVER BEEN A MEMBER IN THE PAST? YES.....NO..... IF YES, LODGE#.....STATE.....YEAR.....

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES.....NO.....

**\*\*ACTIVE MEMBER: \$40.00      ASSOCIATE: \$60.00      (includes initiation fee of \$10.00)**  
**\*\* Active Members must submit copy of Law Enforcement ID and or Certification etc.**

Make Checks Payable to FOP #911 and Mail To: FOP LODGE #911, 349 STEWART AVE., GARDEN CITY, NY 11530

*If accepted for membership, I pledge to respect all laws of the United States, the State of New York, and to support law enforcement in every way I can. If I secure FOP License Plates ( ACTIVE MEMBERS ONLY ), I understand that such plates must be returned to the DMV if I resign or am removed from membership in this organization. I understand that Fraternal Order Police regulates the use of the FOP name & emblem and I cannot use same on advertising, cards, etc without the express permission of the New York State Fraternal Order of Police.*

Signature Required.....DATE:.....  
**SIGNATURE REQUIRED FOR BOTH ACTIVE AND ASSOCIATE APPLICANTS**

(APPLICANT SPONSORED BY) .....

FOR OFFICE USE ONLY:

RECEIVED.....CHECK NBR.....AMOUNT.....ACCOUNT#.....

ACCEPTED.....DENIED.....COMMENTS.....