

## APPLICATION FOR ASSOCIATE MEMBERSHIP

I, \_\_\_\_\_ apply for Membership as an Associate Member of the Fraternal Order of Police, Indianapolis Lodge No. 86 and the following information is submitted concerning myself.

FULL NAME: (Mr. Mrs. Ms. Miss) \_\_\_\_\_  
(Please print) (Last) (First) (M.I.) (Maiden Name)

Age \_\_\_\_\_ Birthplace \_\_\_\_\_ Birthdate \_\_\_\_\_

Present Address \_\_\_\_\_  
(Street Address) (City/State) (Zip Code)

Phone Numbers: \_\_\_\_\_  
(Home) (Work) (Pager) (Cell)

Occupation \_\_\_\_\_ Employer's Name \_\_\_\_\_

Address of Employer \_\_\_\_\_

Have you ever been convicted of a misdemeanor or felony? If the answer is 'yes', please note charge, date, location, and final sentencing disposition. (If additional space is needed, please attach additional sheets to this application. )

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In Indiana, an individual's criminal history is protected by state law. Under Indiana Code 5-2-5-1, an individual has a right not to have his/her criminal history released to unauthorized persons. By signing this form, you are acknowledging that right and allowing the FOP to acquire your criminal history on your behalf. Your intention is to allow the FOP to utilize your criminal history for the purposes of attaining membership in the FOP.

Have you ever been denied membership into the Fraternal Order of Police? \_\_\_\_\_  
(If the answer is 'yes', please attach explanation to this application.)

I swear that the above information is true to the best of my knowledge and that this information will be held in confidence and I understand that if I am accepted into the Fraternal Order of Police, I will support the Lodge and bring credit upon the Membership of the Lodge.

I further understand that all emblems and decals furnished me by the Lodge are the property of the Lodge, and if my membership is revoked or I choose to withdraw my membership, I shall return such emblems and decals to the Lodge.

Check \_\_\_\_\_ Money Order \_\_\_\_\_ Cash \_\_\_\_\_ X \_\_\_\_\_  
(Signature of Applicant)

Recommended by \_\_\_\_\_ Date \_\_\_\_\_

APPLICATION MUST BE FILLED OUT COMPLETELY, and must be accompanied by a Check or Money Order in the amount specified below, payable to the FRATERNAL ORDER OF POLICE, LODGE NO. 86. Membership is renewable on January 1<sup>st</sup> of each year.

**\$35.00** (Single) (To add spouse - \$15.00 - a separate application must be submitted.)

Mail to: FOP #86 1525 Shelby Street, Indianapolis, IN 46203

## BENEFITS OF MEMBERSHIP

1. Associate Membership identification card.
2. FOP SIREN Newsletter (bi-monthly).
3. FOP Picnic (members, spouse and children only).
4. FOP Social Dinner (members & spouse/guest only, at the lodge hall on the last Wednesday of each month).
5. Two FOP window decals plus a license plate emblem for auto.
6. Dinners on Thursday and Friday nights at reasonable prices for you and your spouse (guest).
7. Any other special functions sponsored by the lodge will be published in the Siren newsletter.

As an Associate Member of the FOP, you will be showing support for our law enforcement officers. Some of the agencies represented by FOP Lodge #86 are:

***IPD      Marion County Sheriff's Dept.      State Police***  
***Beech Grove      Cumberland      Speedway***  
***Butler University PD      IPS      IUPUI      Airport PD***  
***Housing Authority      MSD Warren Township***  
***US Postal Inspections***

Collected Associate members dues go to the Members legal defense fund. The Associate Members of FOP Lodge #86 are fundraisers for special Community causes.

What other lodge offers so much for just \$35.00? Be a part of the finest organization the City-County offers!

**\* TO BE FILLED IN BY THE MEMBERSHIP COMMITTEE ONLY \***

*The Membership Committee has investigated the above applicant and recommends that the Applicant  
(BE ACCEPTED) (BE DENIED) Membership  
into the Fraternal Order of Police, Indianapolis Lodge No. 86*