

I, the undersigned, a full time, regular employed or retired law enforcement officer, do hereby make application for Active Membership in the_Fraternal Order of Police NJ-Lodge #200. Should my membership be revoked or discontinued for any cause, I do herby agree to return to F.O.P. Lodge # 200 my membership card and any and all other material bearing the F.O.P. logos or insignia, such as a auto emblem (shield), lapel pin, etc. I agree to abide by the by-laws, rules, and regulations, of the, Fraternal Order of Police Lodge 200, the New Jersey State Fraternal Order of Police, & the National Fraternal Order of Police- Grand Lodge.

ETIRED LAW ENFORC			ITH APPLCI		
Print Name:	111	Senti	Date of Birth:		
Address:					1
City/State/Zip Code:					
Phone ()	wa	ork Facility:	2		
Circle: Renewal or New -	Circle Rank	: Officer / S	Sgt. / Lt. / Maj.	/ Capt. /Re	tired / Other
Have you ever been a me	mber of anothe	er FOP Lodg	e? Yes / No		2-5
If Yes / What Lodge		and wher	1	1.	
	1.			1.00	- X -
E-Mail Address:		1 (C. 197	-	20	L 1
E-Mail Address:	information pro		and accurate to	he best of m	y knowledge.
My Signature verifies that all Applicants Signature:	information pro	wided is true	DATE	1	1
My Signature verifies that all Applicants Signature: \$150.00 Membership	information pro Fee - Check o	ovided is true	DATE Order made p	ayable to	1
My Signature verifies that all Applicants Signature:	information pro Fee - Check of Dication rec	ovided is true	DATE Order made p	ayable to	1
My Signature verifies that all Applicants Signature:	information pro Fee - Check of plication rec ee \$35.00	ovided is true for Money (reived afte	DATE Order made p er October 23	ayable to	1