



FRATERNAL ORDER OF POLICE RIVERSIDE LODGE #8
RIVERSIDE, CALIFORNIA
MEMBERSHIP APPLICATION

NAME:

_____ DOB: _____
First Middle Last

APPLICATION FOR: REGULAR MEMBERSHIP ASSOCIATE MEMBERSHIP

ADDRESSES:

Home: _____
Number Street

City State Zip

Work: _____
Number Street

City State Zip

TELEPHONE NUMBERS:

Home/Cell: () _____ Work: () _____

E-MAIL ADDRESS: _____

AGENCY INFORMATION:

_____ (ATTACH COPY OF L.E. IDENTIFICATION)
AGENCY NAME
_____ [] Active [] Retired
City/County State

CONTACT PERSON: _____ () _____
Name/Title Phone

SPONSOR: _____
Name/Agency/Phone Date:

APPLICANT'S SIGNATURE: _____

MEMBERSHIP DEFINED:

- Must be individuals who are sworn law enforcement personnel, either employed or honorably retired, including local, county, state, federal or law enforcement military police.
- Interested individuals must submit an application, must have a law enforcement reference, and may be subject to a background check.
- Active Members shall have voice and vote, additionally to remain in good standing dues must be current.
- Individuals may be admitted as Associate Members however, Associate Members are non-voting members as such some privileges and benefits offered by the Lodge, as well as the State and National FOP may be limited or not available.

[] SECRETARY ENTERED INFORMATION [] TREASURER ENTERED INFORMATION [] NFOP [] CAFOP
COMMENTS: