

PO Box 804 – Waukegan, IL – 60087 – www.fop66.org

ASSOCIATE MEMBERSHIP APPLICATION

Please choose one:

□ I was a member last year and I wish to renew my application (\$25 is enclosed)

□ I was not a member last year and wish to join (no money is enclosed)

Last Name:	First Name:		MI:
Date of Birth:	Social Securit	ty Number:	
Address:		City:	
State:	Zip Code:	Main TX:	
Work or Other TX:	Em		
Employer:	Pos	sition:	
Are you currently a membe	er of any other FOP lodge	e?	
If yes, which state and lodge	e number?		
Why do you wish to become	e a member of the FOP	Lodge 66?	

I acknowledge that I have completed this form accurately and completely:

If you have not been a member of the Lake County Sheriff's FOP Lodge 66 in the past, <u>do not enclose your dues with this application</u>. All options above in **bold** are required. Failure to complete the application in its entirety will result in your application being denied. New member requests will be contacted following the next assigned lodge meeting as to the outcome of their application. Meetings are scheduled quarterly; therefore your request for membership several months. Completion of this form does not ensure your membership request will be approved. The executive board and active members of Lodge 66 reserve the right to refuse and/or revoke associate membership at any time. Associate membership dues must be received by the lodge secretary no later than October 20th each year for the following year to remain in good standing. Membership cards will then be mailed to the members at or near January 1st. Once your new application has been received and accepted, members must include this form with their yearly membership dues of \$25.

Official Use				