



e-mail _____

DATE _____

PETITION FOR MEMBERSHIP AND INITIATION
APPLICANT SHOULD SUPPLY ALL REQUESTED INFORMATION – TYPED OR PRINTED.

Application must be accompanied by check TOTAL \$ 76.00

OBJECTS AND PURPOSES

This organization is formed for the purpose of increasing our understanding of the rights, duties and problems of police officers; of fostering public respect for them; of strengthening our comradeship with them; of bettering the conditions under which they serve society; of promoting their interests and welfare in every conceivable way; and of being ever ready to render such lawful assistance as may be required by the Florida State Lodge Fraternal Order of Police, or any of its subordinate lodges.

NAME _____ BIRTH PLACE _____ BIRTH DATE _____

RESIDENCE ADDRESS _____ CITY _____ ZIP _____ PHONE _____

OCCUPATION _____ NAME OF FIRM _____

BUSINESS ADDRESS _____ ZIP _____ BUS. PHONE _____

SEND LODGE MAIL TO: RESIDENCE BUSINESS U.S.A. Citizen Yes No

Have you ever pleaded guilty to, or been convicted of a felony? Yes No If your answer is "Yes", state nature of crime, date and place of conviction, and sentence imposed. _____

Has your driver's license ever been suspended for speeding or other moving traffic violations? Yes No If answer is "Yes", state cause or reason, date(s), where, and length of suspension. _____

Are you now or have you ever been a member directly or indirectly connected or affiliated with any organization or group advocating or believing in the overthrow of the government of the United States by force? Yes No

Are you willing to assume an obligation that
Will not conflict with your duties to yourself, or your family, or your religious or political opinions, and that
Will bind you to uphold the constitution and laws of the United States of America?
Yes No

I AGREE, if found qualified, to abide by all the laws, rules, regulations, etc. of the Lodge and I acknowledge that the decal(s), membership card, metal emblem(s), etc., are the property of the Lodge and can be recalled by this Lodge or any Lodge of this Order for misuse or non-payment of dues, or any other valid reasons, and I agree to return said items within ten (10) days of official request. I further understand and agree my failure to comply will subject me to arrest under Florida Statute 817.311.

I hereby affirm and certify all the above answers and statements are true and factual to the best of my knowledge and belief. I pledge to abide by all the laws, rules, and regulations of this Order.

MAKE CHECKS PAYABLE TO:
F.O.P.A. LODGE 5-30

Signed

SPONSORED BY: _____ CHECK ONE: F.O.P. MEMBER F.O.P.A. MEMBER

APPLICANT – DO NOT WRITE BELOW THIS LINE

F.O.P.A. MEMBER _____

REPORT OF INVESTIGATING COMMITTEE: _____

SIGNED _____
Chairman

FOP APPROVED: DISAPPROVED: DATE: _____ **FOPA** APPROVED: DISAPPROVED: DATE: _____

INITIATED ON _____ DATE _____ EMBLEM(S) ISSUED _____ DATE _____ NUMBER(S) _____