



MEMBERSHIP - RENEWAL APPLICATION

NAME _____

DOB _____

ADDRESS _____ APT/UNIT _____

CITY _____ STATE _____ ZIP _____

PHONE (WORK) _____

PHONE (RESIDENCE) _____

E-MAIL _____

AGENCY/EMPLOYER/COMMAND _____

RANK/TITLE _____

CHECK BOX:

NEW MEMBER RENEWAL LAW ENFORCEMENT ASSOCIATE

DUES RECEIVED BY _____ DATE _____

ANNUAL DUES: \$25.00

Sign up 5 New Members and Receive a Special Gift!

*EMAIL: _____ CHECK BOX TO RECEIVE EMAIL NEWSLETTER

MEMBERSHIP: Open to all Law Enforcement Officers (City, State and Federal), and Associate members who are non Law Enforcement Officers. Associate members are from public and private industries and have shown a strong support of the American Law Enforcement.

WE WILL NEVER FORGET OUR FALLEN HEROES