



**FRATERNAL ORDER OF POLICE  
N.Y.S. JAMAICA LODGE #81  
P.O. BOX 494  
DEER PARK, NY 11729-0494**

**2020 MEMBERSHIP APPLICATION**

*New Member:* \_\_\_\_\_ *Renewal:* \_\_\_\_\_ *Transfer From Lodge#:* \_\_\_\_\_

*Full Name:* \_\_\_\_\_ *D.O.B.:* \_\_\_\_\_

*Address:* \_\_\_\_\_

*City, State & Zip:* \_\_\_\_\_

*Home#:* \_\_\_\_\_ *Cell#:* \_\_\_\_\_ *\*\*Email\*\** \_\_\_\_\_

*FOP Plates (if applicable):* \_\_\_\_\_ *Member ID#:* \_\_\_\_\_

**\*\* LAW ENFORCEMENT INFORMATION \*\***

*Dept.:* \_\_\_\_\_ *Command:* \_\_\_\_\_ *Rank/Shield:* \_\_\_\_\_

*Work#:* \_\_\_\_\_ *Ext:* \_\_\_\_\_ *Date Hired:* \_\_\_\_\_ *Date Retired:* \_\_\_\_\_

**\*\* ASSOCIATE / FAMILY MEMBERS \*\***

*Employer:* \_\_\_\_\_ *Work#:* \_\_\_\_\_ *Cell#:* \_\_\_\_\_

*Position:* \_\_\_\_\_ *FOP Member Sponsor:* \_\_\_\_\_

**\*\* BENEFICIARY INFORMATION \*\***

*Name:* \_\_\_\_\_ *Relationship:* \_\_\_\_\_ *Phone#:* \_\_\_\_\_

*Address:* \_\_\_\_\_

*The annual fee for an **Active & Retired** Members: (Law Enforcement) is \$50.00 / **Business & Associate** Members: are \$80.00 / **Family** Associate Member: (Law Enforcement) is \$35.00*

*Mail applications to P.O. Box 494, Deer Park, NY 11729-0494, Checks payable to **FOP Lodge 81***

*Members Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_