ASSOCIATE MEMBER APPLICATION

FRATERNAL ORDER OF POLICE NYC HOUSING POLICE SILVER AND GOLD LODGE #997 MEMBERSHIP APPLICATION



http://fop997.org

Last Name:	First Name:	MI:				
Address:	Home Phone:					
City:	State:	Zip:				
Email Address:	D/0	D/O/B:				
Member Beneficiary: (Applicants age 63 and older are	e ineligible for survivor benefits.)					
Applicant Recommended By *All Associate Member Applican Lodge #997.	nts must be recommended by a current Activ	ve or Associate Member of				
Note: In Addition, all Associate of Good Conduct" form to this a	e Member Applicants must also complete and application.	d attach their "Certification				
Member Signature:	Dat	te:				
Please be su	ure to include your check payable to "FOP Lo	odge 997"				
	\$55 "ASSOCIATE MEMBERSHIP"					
An Associate Mei	mber includes all <u>NON-LAW ENFORCEMENT</u>	applicants.				
Pease	e Print, Sign & Mail WITH YOUR DUES CHECK	to:				
	Fraternal Order of Police 5 Rita Crescent Commack, N.Y. 11725					
Date Received:						
	(page #1)					

CERTIFICATION OF GOOD CONDUCT

NAME OF APPLICANT (P	RINT)				
Have you ever been con	victed of a crime?	YES	NC)	(circle one)
Are you presently a defe	endant in any crim	inal proceeding?	YES	NO	(circle one)
Have you ever been con	victed of Operatin	g a Motor Vehic	le while unde	r the infl	uence
of alcohol or drugs?	YES	NO (circle one)		
Has your driver's license	ever been susper	nded or revoked	YES	NO	(circle one)
·	·				
If you answered "yes" to	any of the above	questions, pleas	e explain in t	he remar	ks section below.
Remarks:					
Note: This Certification	of Good Conduct	must be comple	ted in full and	d ALL QUI	ESTIONS MUST BE
ANSWERED. Attach this		•			
I certify that I am a law a Certification of Good Co	-			•	•
or termination of memb		_	a, raise stu	.cciic W	
SIGNATURE				DATE)

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