



To the Officers of the Fraternal Order of Police:

I, the undersigned, a full-time, regularly employed officer, retired law enforcement officer, or reserve officer do hereby make application for active membership in Lodge Number 1 , Minnesota Fraternal Order of Police.

Enclosed is an annual dues check for \$25.00 made out to "MN FOP Lodge 1.

If my membership should be revoked or discontinued for any cause, I do hereby agree to return to the lodge my membership card and any other material bearing the FOP insignia, such as auto emblem, lapel pin, etc.

Applicant's Name _____ DOB _____

Address _____

City _____ State _____ Zip _____

Employer _____ Position/Assignment _____

Work Phone (____) _____ Home Phone (____) _____

E-Mail Address _____

Signature _____ Date _____

Mail to; FOP Lodge #1, PO Box 2174 Inver Grove Heights MN 55076

(FOR OFFICE USE ONLY)

Received by: _____ Date _____ Check # _____

Entered National / Local /State _____