



LODGE #196

**Fraternal Order of Police**  
**Lodge # 196**  
**P.O. BOX 02-0120, BROOKLYN, NY 11201**



LODGE #196

# Membership Application

(Please print clearly)

D.O.E: \_\_\_\_\_

Mem. ID: \_\_\_\_\_

**F**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Title/Rank: \_\_\_\_\_ Facility/PCT: \_\_\_\_\_ Tour: \_\_\_\_\_ Squad: \_\_\_\_\_

Social Security: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ D.O.B: \_\_\_\_/\_\_\_\_/\_\_\_\_ Religion: \_\_\_\_\_

Seniority Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Shield #: \_\_\_\_\_ Item/Tax Reg.# \_\_\_\_\_

### Home Address:

(Please include apt #, City, State, Zip)

{ } Change of Address

\_\_\_\_\_  
\_\_\_\_\_

Home Phone#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Office Phone#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Home Fax #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Office Fax #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Beeper/Cell #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

E-Mail: \_\_\_\_\_

### Annual Membership Dues

{ } \$30.00 Regular Member

{ } \$35.00 Associate Member (Civilian)

### Member Status

*Officers*

*Civilian*

Active { } New Member { } Renewal

Active { } New Member { } Renewal

Retired { } New Member { } Renewal

Retired { } New Member { } Renewal

### Beneficiary Information

Beneficiary Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Endorsement of Member: \_\_\_\_\_ Date of Endorsement: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature: X \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**P**