



Fraternal Order of Police ARIZONA FEDERAL LODGE

P.O. Box 69
Marana, AZ 85653



NEW MEMBER APPLICATION

APPLICANT INFORMATION

TODAY'S DATE

Last First MI
Address **NON GOV Email** DOB
City Zip Phone

AGENCY INFORMATION

Other Duty Location EOD
Address
City Zip Phone

MEMBERSHIP AGREEMENT

To the officers of the Fraternal Order of Police, Federal Lodge #2:

I, the undersigned, attest that I am a Federal Law Enforcement Officer / Agent, do hereby make application for Active Membership to the Fraternal Order of Police, Arizona Federal Lodge #2. Should my membership be revoked or discontinued for any reason while in good standing, I do hereby agree to return to the Lodge my membership card and any other material bearing the F.O.P. insignia.

Dues for currently employed Agents and Officers: **\$50.00** Monthly Debit from my Checking or Saving: **Membership is effective the first day of the month, following acceptance (vote) into the lodge. Acceptance (vote) is conducted on the 1st Wednesday of the month. **

I hereby authorize THE FRATERNAL ORDER OF POLICE, FEDERAL LODGE # 2 & Arizona Labor Council, INC (hereafter "FOPFL2/ALC") to initiate debit entries to my Checking OR Savings account as indicated below at the financial institution (hereinafter "BANK/DEPOSITORY") named below, to debit the same of an amount not to exceed \$50.00 per month. Transactions will begin the month following the date of this authorization.

To the officers of the Fraternal Order of Police, Federal Lodge #2 & FOPFL2/ALC:

This authorization will remain in full force and effect until the FOP/ALC has received written notification from me of its termination in such time and in such manner as to afford the FOP/ALC and my DEPOSITORY, a reasonable opportunity to act on it. I understand that I am in full control of my payment and if at any time after membership, if I decide to discontinue my membership, I must mail, deliver or email a 30-day written notice to the Fraternal Order of Police, Federal Lodge #2 PO Box 69, Marana, AZ 85653. Named above is authorized on this account and grants the Fraternal Order of Police, Federal Lodge #2 to initiate debit entries to the following checking or savings account.

I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS OF THIS AGREEMENT

Click to Agree

Email signed form to geiddyfedlodge2@gmail.com & joefedlodge2@gmail.com

BANKING INFORMATION

Bank Routing # Bank Account # Bank Name
Signature _____ Date

TO ADD A DIGITAL SIGNATURE, CLICK IN SIGNATURE BOX AND FOLLOW INSTRUCTIONS

ADMIN USE ONLY: DATE RECEIVED _____

MEMBERSHIP EFFECTIVE _____ DATE ENTERED: _____ DIRECT WITHDRAWAL: _____ ENTERED BY: _____