



**Jason Conklin Memorial Lodge #957
Fraternal Order of Police
Application for Associate Membership**



To the officers and members of the Fraternal Order of Police:

I, the undersigned, do hereby make an application for associate membership in the Jason Conklin Memorial Lodge #957 of the Fraternal Order of Police.

If my membership should be suspended, revoked, or discontinued for any reason, I agree to return to an officer of Lodge #957 requesting it, my membership card, and/or any material bearing the FOP insignia, such as auto insignia, decals, lapel pins, etc. By my signature below, I consent to a criminal background check to determine my suitability for membership in the lodge and there is no guarantee of an applicant's acceptance.

Signed _____ Date _____

ASSOCIATE MEMBERS ONLY NEW PREVIOUS MEMBER (Check one)

Applicant's Name _____

Address _____ City _____ State _____ ZIP _____

Home Phone _____ Cell Phone _____

Date of Birth _____ E-Mail _____

Employer's Name _____

Employer's Address _____ City _____ State _____ ZIP _____

Beneficiary Information _____ Relationship _____

Beneficiary Address _____ City _____ State _____ ZIP _____

Name of Sponsoring Member _____ Membership Number _____

Have you ever been arrested? NO YES (If yes, please explain on the reverse.)

MAIL TO: Jason Conklin Memorial Lodge #957, PO Box 9, Fort Montgomery, NY 10922

OFFICE USE ONLY

Date Received

Received By

DUES: \$60.00

Pay online via your mobile banking app!!! We accept Zelle!!!
Send your payment to membership@foplodge957.org