



Application Form for New Membership, Renewal, or Information Updates

FRATERNAL ORDER OF POLICE, DC LODGE

711 4th Street, NW • Washington, DC 20001

Phone: (202) 408-7767

www.dc-fop.org / www.fop.net

Dues

Active: \$50/year

Associate: \$50/year

Lifetime Active: \$618.50

Lifetime Associate: \$618.50

New Application

Renewal

Information Update

It is important that you indicate on the right whether this is for a new membership, a renewal, or an update to current information. Please enter the membership year (below) for which this application covers.

Membership Year	
First Name	
Middle Initial	
Last Name	
Name Suffix (<i>Jr., Sr., I, etc.</i>)	
Date of Birth	
Home Address – Street	
Home Address – City, State, & Zip	
Home Telephone Number	
Mobile Telephone Number	
Work Telephone Number	
Email Address	
Beneficiary's Name	

For Active Membership

In order to be considered for “ACTIVE” status membership with the Fraternal Order of Police, District of Columbia Lodge #1, you must (1) be employed by a government agency (2) a full time sworn law enforcement officer, (3) your agency must have statutory arrest authority and (4) your agency must be headquartered within the District of Columbia. Retired members are permitted to retain active status membership with our lodge if you were an active member in good standing at the time of your retirement and you currently receive retirement benefits from your agency.

New applicants and former members wishing to be reinstated must either attach a photocopy of your credentials with this application and dues or come by the lodge and have your credentials verified by a lodge official. If you belong to an FOP labor committee and the labor committee pays your membership dues, your labor committee will certify your eligibility, and you will not be required to provide your credentials. **New applicants and former members wishing to be reinstated, do not fax your applications, they must be mailed or dropped off in person with a copy of your credentials and membership dues for processing.**

Agency	
Title/Position	
Labor Committee	<input type="checkbox"/> I am NOT in a labor committee. <input type="checkbox"/> I AM currently a dues paying member of my agency's certified labor committee.

I, the undersigned, affirm that I meet the requirements for active status membership and do hereby make application for Active Membership with the Fraternal Order of Police, District of Columbia Lodge #1.

Signature _____ Date _____

For Associate Membership

Those applying for “ASSOCIATE” membership must be sponsored by an Active Status Member in good standing with the lodge.

Sponsor's Name _____ Sponsor's Card Number _____

Sponsor's _____ Date _____

Signature _____