



Don Owens Memorial Lodge #88,
Fraternal Order of Police, Inc.
2010 Membership Application

Type of Membership [] New [] Renewal	<input type="checkbox"/> Active (\$60.00)	<input type="checkbox"/> Active 20+ Years (\$32.50)	<input type="checkbox"/> Associate Professional (\$25.00)	<input type="checkbox"/> Retired
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Name _____
(Last) (First) (Middle Initial)

Address _____
(Street) (City) (Zip)

Date of Birth ____ / ____ / ____

Agency _____ **Years in Law Enforcement** _____

Home Phone _(____) _____ **Cell Phone** _(____) _____

Work Phone _(____) _____ **E-mail** _____

Recommended by _____

Occupation or Company Name _____

Please list skills, talents and/or certifications that you would be willing to provide to the Lodge.

I hereby agree to abide by the Constitution and By-Laws of the Don Owens Memorial Lodge #88, Fraternal Order of Police, Inc.

Signature _____ **Date** _____

PLEASE INCLUDE PAYMENT WITH APPLICATION. [] Check [] Cash

1st Reading Date: _____ **2nd Reading Date:** _____ **Status:** Approved Denied

Remit to:
Don Owens FOP #88
PO Box 1561
Bloomington, IN 47402

www.fop88.org