



Application for Membership

**Fraternal Order of Police
Associates of Ohio, Inc.
Cuyahoga Falls Lodge # 31**

(Print) Name in Full

Birthplace

Birth Date

Email

Residence or Cell Phone

Residence (Street Address, City, State, Zip Code)

Profession or Occupation

Business Name

Business (Street Address, City, State, Zip Code)

Have you ever been a member of any other FOPA Lodge?

FOP Lodge? _____

When? _____

I enclose my check (or money order) for \$55.00 to cover initiation fee and dues for one year.

I, the undersigned, hereby make application to join Cuyahoga Falls Lodge #31 of the Fraternal Order of Police Associates of Ohio, Inc., and hereby state that I am more than 18 years of age, and a citizen of the United States of America.

I, hereby, state that I am of good reputation and have never been convicted of a felony and never have been a member of any subversive or un-American organization. I Agree, if found qualified, to abide by the rules, laws, regulation, etc., of the Lodge, and that the decal, membership card, etc. are the property of the Lodge and can be recalled by the Lodge of this order, for misuse or non-payment of dues, or other valid reasons.

TO WHOM IT MAY CONCERN: I hereby give any law enforcement agency or organization the authority to investigate or furnish information concerning me as may be required by this petitioned lodge with recourse, for consideration of application to become a member. This will be held confidential.

Signed

Date

Witnessed

Date

Recommended by

Note if FOP or FOPA

Recommended by

Note if FOP or FOPA