



# FRATERNAL ORDER OF POLICE ASSOCIATE LODGE #1 COVINGTON, KENTUCKY



## APPLICATION FOR ASSOCIATE MEMBERSHIP

 **SINGLE MEMBERSHIP - \$30**

### APPLICANT INFORMATION

 **COUPLE MEMBERSHIP - \$50**

Name:			SSN:		
Email:			Date of birth:		
Current address:					
City:	State:	ZIP code:	Phone:		
Have you ever been arrested? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, explain:					

### EMPLOYMENT INFORMATION

Current employer:					
Employer address:				Position:	
City:	State:	ZIP Code:	Phone:		

### SPOUSE INFORMATION IF JOINT MEMBERSHIP

Name:			SSN:		
Email:			Date of birth:		
Have you ever been arrested? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, explain:					

### SPOUSE EMPLOYMENT INFORMATION

Current employer:					
Employer address:				Position:	
City:	State:	ZIP Code:	Phone:		

### SIGNATURES

**Applications require the signatures of a current associate member and a parent member (a current or retired Covington police officer).**

Signature of Associate Sponsor:

Signature of Parent Member:

*This is to certify that I have made the above application and agree to abide by the Constitution and By-Laws of the Covington Fraternal Order of Police Associate Lodge #1. Should my membership be revoked, I agree to return to the Secretary the emblem and the card furnished by the Lodge.*

*I, the undersigned, hereby authorize the Covington Police Department and any other law enforcement agency to release any criminal or traffic record that I may have on file to the Covington Fraternal Order of Police Lodge #1, for the purpose of a background investigation.*

Signature of applicant:	Date:
Signature of spouse (for joint membership):	Date:

### FOR INVESTIGATIVE COMMITTEE ONLY

Assoc. Reading:	1 <sup>st</sup> Reading:	2 <sup>nd</sup> Reading:
<b>Applicant Approved</b>	Signature of Committee member:	
<b>Applicant Rejected</b>	Signature of Committee member:	