## **ASSOCIATE MEMBERSHIP APPLICATION CLASS I**

## FRATERNAL ORDER OF POLICE

Le-Hampton Lodge 35 Lehigh and Northampton Counties, PA

P. O. Box 3593 Allentown, PA 18106

FIRST	NAMI		M.I	LAST	NAME	
ADDR	ESS		(	CITY		
STATE		ZIP	AGE	DOE		
occu	PATIC	N	EMPLO	YER		
				soc	# (last 4 only)	
HAVE	YOU I	EVER BEEN ARRESTED F	OR A MISDEME	ANOR OR	FELONY	
IF YES	PLEAS	SE EXPLAIN				
suspe	nded	or revoked for any reas	son. The applica	tion fee	emblem and/or window decal if must be paid with this application  Circle your plan choic	ı <b>.</b>
		B,C + Administration 1			+ Administration <b>1 Yr</b> . \$564	
	LDP	B,C + Administration Fe	ee <b>6 mo.</b> \$156	A,B,0	C + Administration <b>6 mo.</b> \$282	
****	* (Recommendation must be made by an active member of Le-Hampton Lodge 35)					
RECO	MME	NDED BY: (print)				
SIGNA	TURE	OF ACTIVE MEMBER _				
	Lo	dge use only Approved	d: Yes N	o	Date Accepted	_
		Date Paid	Check # _		Cash Amount	