

APPLICATION FOR MEMBERSHIP

FREDERICK COUNTY DEPUTY SHERIFF'S LODGE 102
FRATERNAL ORDER OF POLICE, INC.
P.O. BOX 3220, FREDERICK, MARYLAND, 21769-3220

LAST NAME	FIRST NAME	MIDDLE NAME	DATE OF BIRTH	
ADDRESS		CITY	STATE	ZIP
SOCIAL SECURITY NUMBER		HOME PHONE	CELL PHONE	
AGENCY	ASSIGNMENT		HIRE DATE	
SPOUSE'S NAME	CHILDREN'S NAME(S)		EMAIL ADDRESS	

MEMBERSHIP CLASSIFICATION

- | | |
|--|---|
| <u>LODGE 102</u> | <u>LODGE 102A</u> |
| <input type="checkbox"/> ACTIVE LAW ENFORCEMENT | <input type="checkbox"/> PUBLIC SAFETY PROFESSIONAL
(Corrections Officer, Animal Control Officer, Dispatcher, Civilian Police Staff) |
| <input type="checkbox"/> RETIRED LAW ENFORCEMENT | <input type="checkbox"/> RETIRED PUBLIC SAFETY PROFESSIONAL |
| | <input type="checkbox"/> GENERAL ASSOCIATE |

AFFIDAVIT

By my signature, I certify that I am at least twenty-one years of age and have not been convicted of any criminal offense (other than non-jailable traffic). I am not a defendant in any pending criminal, civil, or departmental trial, hearing, or investigation in this or any other state. I am not and I have never been a member of any group or organization that advocates intolerance or violence directed at any racial, religious, or ethnic group or the overthrow of the Constitutional Government of the United States of America, or the State of Maryland. I pledge that I will uphold, support, and defend the Constitution and Laws of the United States, the State of Maryland, the Grand and State Lodges, as well as the Frederick County Deputy Sheriff's Lodge 102 of the Fraternal Order of Police, Incorporated.

SIGNATURE DATE

FREDERICK COUNTY EMPLOYEE PAYROLL DUES RELEASE

By my signature, I authorize the Frederick County Government to deduct from my pay any and all fees, dues, or assessment which are or may become due as a condition of being or remaining a member of the Frederick County Deputy Sheriff's lodge 102 or the Frederick County Deputy Sheriff's Associate Lodge 102A. I reserve the right to revoke this authorization upon my withdrawal from the Lodge.
(Dues are assessed at a rate of 1.5% of the base salary which is currently \$_____ /pay period for Lodge 102, and 1.25% of the base correctional officer salary which is currently \$_____ / pay period for Lodge 102A. NOTE: The rates will automatically increase when the base salaries increase.)

SIGNATURE AUTHORIZING DUES PAYMENT DATE

DATE VOTED INTO LODGE MEMBERSHIP LODGE SECRETARY SIGNATURE APPLICATION #