## **Fraternal Order of Police**

Membership # \_\_\_\_\_

Municipal Officers Lodge 9, Inc.

P.O. Box 155, Riverdale, Md. 20738-0155

## **Associate Membership Application**

Year 20\_\_\_\_

## Dues are \$60.00 a year and are Prorated Quarterly

## Please Print All Information

Name		Date of Birth/		
Address		Age	Male,	Female,
City		State		Zip
Home Phone	Cell	Occupat	tion	
Personal E-Mail				
Have you ever been convicted	of a serious criminal off	ense? * If Ye	es, Please, expl	ain on back of application. A
yes, does not mean you are au	itomatically refused me	embership.	If you are refus	sed, You, will be notified and all
funds returned to you.				
Inc. in accordance with its Cons be revoked or discontinued for return to Lodge 9 my members decals, emblems lapel pins etc.	any cause other than reship card and any other	etirement w material bea	hile in good sta	insignia, such as tags, auto
Applicants Signature		Date	~ 1.	
Mail Completed Appl	lication to Lodge 9 P.C	). Box 155 R	Riverdale, Md	standing with Lodge 9 . 20738-0155
				Accepted By