

**Fraternal Order of Police**  
**Municipal Officer's Lodge No. 9, Inc.**  
P.O. BOX 155, RIVERDALE, MARYLAND 20738-0155

**Associate Member New & Renewal Application**

**Fiscal Year 202** \_\_\_\_\_

**Member #** \_\_\_\_\_

**Dues for Associates: \$60.00 Check, Money Order, Zelle, Cash App, \$65.00 if by Pay Pal (to cover their fee)**

Dues are for period January 01 to December 31 of each calendar year!

All applications must be accompanied by a check or money order made payable to F.O.P. Lodge 9.

**Please, Clearly Print the below requested information.**

I, the undersigned, do hereby apply for membership in Municipal Officer's Lodge 009

**NAME** \_\_\_\_\_

**HOME ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_

**STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

**BIRTH DATE** \_\_\_\_\_ **MALE- FEMALE**

**SSN (mandated)** \_\_\_\_\_

**CELL PHONE** \_\_\_\_\_

**PERSONAL E-MAIL** \_\_\_\_\_

**Occupation** \_\_\_\_\_

**Why do you want to join Lodge 9: Write small paragraph on back of application!**

I hereby make application for membership in the Fraternal Order of Police, Municipal Lodge No. 009, Inc., in accordance with its Constitution and By-Laws and agree to be bound therewith. If my membership should be revoked or discontinued for any cause. I do hereby agree to return to Lodge 009 my membership card and any other material bearing the F.O.P. insignia, such as auto emblem, lapel pin, etc. I also understand that my FOP tags issued by MVA will be flagged for non-renewal.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Sponsored By \_\_\_\_\_  
Any Questions contact President Lee Donaldson 240-464-3140/ president@mdfop9.com

FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW THIS LINE

DATE PAYMENT RECEIVED: \_\_\_\_\_ PAYMENT TYPE: CHECK # \_\_\_\_\_ PAY PAL# \_\_\_\_\_

MONEY ORDER \_\_\_\_\_

AMOUNT \$ \_\_\_\_\_ ACCEPTED \_\_\_\_\_ REJECTED \_\_\_\_\_  
INITIALS INITIALS

III/10/22/2024

***Representing Municipal Police Officers Through Out Maryland***