

**Minnesota State Lodge
Fraternal Order of Police**



Application for Membership

To the Officers of the Fraternal Order of Police

I, the undersigned, a full-time, regular employed law enforcement officer, do hereby make application for active membership in Northwest Minnesota Lodge #8.

If my membership should be revoked or discontinued for any cause other than retirement while in good standing, I do hereby agree to return to the lodge my membership card and any other material bearing the FOP insignia, such as auto emblem, lapel pin, etc.

Applicant Name _____ **Date of Birth** _____

Address _____

City _____ **State** _____ **Zip** _____

Employer _____ **Position/Assignment** _____

Work Number _____ **Home Number** _____

Cell Phone _____ **E-mail** _____

Signed _____ **Date** _____

For Lodge use only

Received by _____ Title _____

Signed _____ Date _____

Lodge Dues are \$30.00 for the entire calendar year.

Please return completed application to:
NW MN FOP #8, Fraternal Order of Police
P. O. Box #901
Moorhead, MN 56561
www.mnfop8.com – info@mnfop8.com