

**Fraternal Order Of Police, Cambridge – Dorchester Lodge #27, Inc.**

P.O. BOX 401, CAMBRIDGE MD. 21613 ~ PHONE# 410-330-8968 ~ E-Mail Address: fopcambridge27@yahoo.com



**“ASSOCIATE MEMBERSHIP APPLICATION”**

**To the officers of the Fraternal Order of Police, Cambridge-Dorchester Lodge # 27 Inc.**

I, the undersigned do hereby make an application for Associate Membership in the **F.O.P. Cambridge-Dorchester Lodge # 27 Inc.** If my membership should be revoked or discontinued for any cause, I do hereby agree to return to said lodge my membership card, auto emblem and any other material or property bearing the F.O.P. insignia or that belongs to the lodge.

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address: \_\_\_\_\_

Home/Cell Phone # \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Have you (\* or your Spouse) ever been convicted of a serious criminal offense: [ ] Yes [ ] No**

If “Yes” than please explain: \_\_\_\_\_

\_\_\_\_\_  
The above information is true and correct to the best of my knowledge and I understand that false or misrepresenting information are grounds for expulsion from the lodge.

Date: \_\_\_\_\_ Your Signature: \_\_\_\_\_

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**YOUR SPOUSE CAN JOIN THE LODGE AS AN ASSOCIATE MEMBER FOR AN EXTRA \$15.00**

\*Spouses Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home/Cell Phone # \_\_\_\_\_ E-Mail: \_\_\_\_\_

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**Sponsoring Active F.O.P. Member:** \_\_\_\_\_  
(Police Officer Member) (Printed Name)

*Thomas R. Hurley*  
\_\_\_\_\_  
(Signature)

**Please Note:**

Associate Membership Dues are **\$25.00 per year** (\$40.00 if Spouse is also on Application)  
Make Check payable to: **F.O.P. Cambridge-Dorchester Lodge # 27** (Submit with Application)

Mail to: **F.O.P. Cambridge-Dorchester Lodge # 27**  
**P.O. Box 401**  
**Cambridge, Maryland 21613**

Yearly Membership includes: Membership Card, F.O.P. Auto Decal  
Attendance to F.O.P. Lodge # 27 Social Functions/Events