

The Northeast Pennsylvania 10-13 Club
A Chapter of the National NYCPD
10-13 Organization, Inc.



Membership Application

PLEASE PRINT ALL REQUESTED INFORMATION

LAST NAME _____ FIRST _____ MI _____

ADDRESS _____ CITY _____ STATE _____

ZIP CODE _____ HOME PHONE (____) _____ CELL (____) _____

SPOUSE'S NAME _____ EMAIL ADDRESS _____

BENEFICIARY'S NAME FOR SURVIVOR FUND _____

BIRTH DATE ____/____/____ ANNUAL DUES ARE \$20.00 - CHECK # _____

APPOINTMENT DATE ____/____/____ RETIREMENT DATE ____/____/____

PENSION # (REQ'D) _____ LAST COMMAND _____ LAST RANK _____

LIST ALL PREVIOUS COMMANDS _____

ASSOCIATE MEMBERS

LAW ENFORCEMENT AGENCY _____ RANK _____

LAW ENFORCEMENT TELEPHONE (____) _____

RETIRED (____) ACTIVE (____) MILITARY: (____) ACTIVE (____) RETIRED

I declare my desire for membership in the Northeast Pennsylvania 10-13 club and to abide by the rules and constitution of the club. Furthermore, I promise to remain a member in good standing and to submit my yearly dues on or about the 1st of January. By affixing my signature below, I attest to the above as being true and correct to the best of my knowledge.

Signature _____ Date _____

Make Checks Payable to:
NEPA 10-13
P.O. Box 316
Mount Pocono, PA 18344