



DeKalb Fraternal Order of Police

William E. Peacock, Jr. Lodge #10
1238 Ridge Avenue
Stone Mountain, Georgia 30083

2012 Application for Membership/ Member Update Form

MEMBER INFORMATION (Please fill out completely and legibly)

_____ Name [Last, First, Middle Initial]	_____ Home Phone
_____ Street Address	_____ Mobile Phone
_____ City, State, Zip	_____/_____/_____ Date of Birth
_____ Email Address (NON-WORK) @	_____ Year joined Fraternal Order of Police
_____ Agency, Division, and Precinct	Retired? (YES NO) If yes, date retired? _____

Notes to Members:

The DeKalb Fraternal Order of Police utilizes an email service in order to disseminate Lodge news and information to its Members. You do have the option to unsubscribe from this service (link is at the bottom of each email), but you risk missing important information pertinent to you.

To better ensure the security of your private information, member benefit beneficiary information is kept separately from your renewal information. If you wish to change your beneficiary in the future, obtain a new beneficiary form from our website. It is no longer necessary to resubmit your beneficiary information annually. It is, however, the responsibility of the Member to keep the information current with the Lodge Secretary.

Your 2012 Lodge Secretary is: **Bob Hillis** bhillis@dekalbfop.org

Dues: Member dues are \$105 yearly for Active (employed) members and \$65 yearly for Retired members. Dues may now be paid using several methods. In addition to the usual check/money order option, you may also pay by credit card or by automatic monthly bank draft. Pick the method that works best for you.

- Check/Money Order** – mail in your check or money order (payable to DeKalb FOP) along with this completed form.
- Monthly Bank Draft (ACH)** – complete the ACH Authorization Form and mail with this completed form. Get the authorization form online at www.dekalbfop.org/join.htm.
- Paypal/Credit Card** – go to www.dekalbfop.org/join.htm and follow the instructions for online payment. Make sure to keep your confirmation email from Paypal. Once completed, mail in this completed form.

X _____ **Date:** _____
Signature

Mailing address: DeKalb FOP, 1238 Ridge Avenue, Stone Mountain, GA 30083

Office Use Only

Per Capita Paid:	Member Card Sent:	Insurance Added:
Date From Received:	Received by:	Cycle: (Annual/Recurring)
Payment Method:	Amount:	Cycle End: (mm/yyyy)

www.dekalbfop.org