Fairfax Fraternal Order of Police

Lodge 77

## MEMBERSHIP FORM INSTRUCTIONS

Please follow these instructions as they will assist us in maintaining a membership database that will serve you with staying in contact and constant communication with your FOP Lodge 77.

1. Select “New Member” (which will be case for the majority) if:
   1. This is the first application for this Lodge.
   2. If you were a member of another Lodge and allowed dues to lapse.
2. Select “Updating Member” if:
   1. The information on the original application has changed, i.e. address, email, name change. If in a case where your name has changed and you have insurance benefits, please ensure that the beneficiary form is updated also and sent to the Lodge for filing and recording.
3. Please select your level of membership. Membership with full benefits includes both legal and life insurance.
4. Complete your name in print. DO NOT use script or cursive.
   1. Use last name first, first name and then middle as the format.
   2. Complete the address of your home, as this is where you will receive correspondence.
5. Email:
   1. This SHALL be a NON-COUNTY or non-governmental email address. Please use a PERSONAL email address.
   2. Information which may or may not violate any IT restricts will be sent through this medium.
   3. Case information or other correspondence will sent to this email, personal email communication is NOT subject to FOIA.
6. Social Security Number and DOB:
   1. Ensure this is legible.
7. Where do I send the forms:
   1. Please send completed application and beneficiary form via US Mail to:

Fairfax FOP Lodge 77, 10521 Judicial Drive, Suite 110 Fairfax, VA 22030.

* 1. Please enclose a check for one quarter of dues with your application.

The information contained within this document is the property of the Fairfax Fraternal Of Police, Lodge 77 and therefore shall only be used with the consent of the Executive Board for the purpose and benefit of its members and at the direction of the Executive Board of the Fairfax Fraternal Order of Police, Lodge 77

***FAIRFAX FRATERNAL***



***ORDER***

***OF POLICE***

***LODGE***

***No. 77***

## OUTSIDE JURISDICTION MEMBERSHIP INFORMATION FORM



### NEW MEMBER

 **UPDATING MEMBER**

**NAME:**

**EIN: DOB:**

**ADDRESS:**

**CITY: STATE: ZIP:**

**SOCIAL SECURITY NUMBER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE: HOME \_OTHER**

**DEPARTMENT: ASSIGNMENT:**

**SPOUSE’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PERSONAL EMAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**REFERRED BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ T-SHIRT SIZE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Send completed forms via US Mail to:***

***Fairfax Fraternal Order of Police, Lodge 77***

***10521 Judicial Drive, Suite 110 Fairfax, VA 22030***

* **MEMBERSHIP WITH FULL BENEFITS ($648.00 YR) $162.00 QUARTER**
* **MEMBERSHIP WITH LEGAL (ONLY) ($384.00 YR) $96.00 QUARTER**
* **MEMBERSHIP WITH LIFE INSURANCE (ONLY) ($284.00 YR) $71.00 QUARTER**

**YOU WILL BE INVOICED QUARTERLY IN JANUARY, APRIL, JULY, AND OCTOBER. INVOICES MUST BE PAID WITHIN 30 DAYS. PAYMENT OPTIONS WILL BE LISTED ON THE INVOICE.**

**FAILURE TO REMIT DUES WITHIN 30 DAYS WILL RESULT IN SUSPENSION OF LIFE INSURANCE AND/OR LEGAL BENEFITS. ONE REMINDER WILL BE SENT. CONTINUED FAILURE TO REMIT DUES WILL RESULT IN TERMINATION OF MEMBERSHIP AND TERMINATION OF ALL ASSOCIATED BENEFITS.**