

Fraternal Order of Police Lodge 5 Auxiliary

"Never Let them Walk Alone"

11630 Caroline Road, Philadelphia, PA, 19154



Membership Application 2024-2025

I, the undersigned, in making this application for membership to the Fraternal Order of Police Lodge 5 Auxiliary, do certify that I am 18 years of age or older and I am related to an active or retired member in good standing of the Fraternal Order of Police Lodge 5. I may also be related to a member who is deceased.

Annual Dues

Due are \$20.00 annually, and due by October 1, of each subsequent year thereafter. Check/Cash or Money Order can be made out to FOP Lodge 5 Auxiliary and can be paid at a meeting or mailed to:

FOP Lodge 5 Auxiliary
11630 Caroline Road, Philadelphia, PA, 19154

Name: _____ D.O.B. _____

Address: _____ City _____ State _____ Street _____ Zip _____

Phone: _____ Home or Cell _____ Email: _____

FOP Family Member: _____ Active or Retired

FOP Member's District/Unit: _____ Relationship: PARENT SPOUSE CHILD OTHER

Children's Name(s) and Birth dates: _____

Ideas for Guest Speakers/Meeting Topics: _____

Ideas for Events and Fundraising: _____

What event/fundraising committee would you be most interested in: _____

Do you own a business or have a talent that could assist with auxiliary meetings, fundraising or events? If so what and how could you assist us?

Refer a Friend-Name: _____ Email _____

Internal Use: Date Rec'd _____ Check# _____ /Cash/Money Order # _____

SGT@ Arma _____ Treasurer _____

COPY OF CURRENT INSURANCE PACKAGE RECEIVED _____