

***Cuyahoga County Police Chiefs Association  
Membership Application***

NAME \_\_\_\_\_ DOB \_\_\_\_\_

TITLE \_\_\_\_\_

RESIDENCE ADDRESS \_\_\_\_\_

RES. PHONE \_\_\_\_\_ SPOUSE'S NAME \_\_\_\_\_

**APPLICATION FOR:**

- ACTIVE MEMBERSHIP (POLICE CHIEFS) \$200.00/yr**
- LAW ENFORCEMENT ADMINISTRATOR  
MEMBERSHIP \$125.00/yr**
- ASSOCIATE MEMBERSHIP \$150.00/yr**

.....  
Complete all applicable information.

DEPARTMENT \_\_\_\_\_

AGENCY/COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

EMAIL \_\_\_\_\_ CELL# \_\_\_\_\_

DATE APPOINTED TO DEPT. \_\_\_\_\_

DATE APPOINTED CHIEF \_\_\_\_\_

MUNICIPALITY POPULATION \_\_\_\_\_ SQ.MI. \_\_\_\_\_

NUMBER OF FULL TIME OFFICERS \_\_\_\_\_ P/T \_\_\_\_\_

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I hereby make application for membership in the Cuyahoga County Police Chiefs Association, Inc. and if accepted agree to support it's Constitution and By-Laws.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

RECOMMENDED BY \_\_\_\_\_