



Associate Membership Application

Fraternal Order of Police

Red Rose Lodge 16 | P.O. Box 4884, Lancaster, PA 17604-4884

**** Applicants must be 21 years of age ****

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Cell Phone: _____ Home Phone: _____

Occupation: _____

Employer: _____

Have you ever been arrested, other than a minor traffic violation? Yes No

If yes, please explain:

Associate Membership can be revoked at any time for just cause by a majority vote of the active membership during a monthly lodge meeting.

Should my application be approved, and I become an Associate Member of Red Rose Lodge 16, I hereby promise to adhere to all rules and regulations of Associate Members.

Signature of Applicant: _____

Dues: \$20 per year (due with application) Emblems (\$10) _____ Stickers (\$1) _____

Recommended By: _____

*** Below for Lodge Use Only ***

Approved: Yes No Date Accepted: _____

Date Paid: _____ Check #: _____ Cash (Amount): _____

Number of Emblems: _____ Number of Stickers: _____

Other Information: _____