Police Emerald Society of the Washington D.C. Area

New					Renewal	
		MEMBERS	HIP APPLICATION			
Full Name:					Date:	
	Last	First		М.І.		
Address:						
	Street Address				Apartment/Unit #	
	City			State	ZIP Code	
Date of Birtl	n:		Email Address:			
Home Phone:						
	:					
Rank:						
Date of App	t.:					
Gaelic Activ	e/Retired Sworn Law E	nforcement Personr	nel:		Active	
Civilians (Others of Gaelic Ancestry):					Associate	
General Pul	blic (Non-Gaelic):				Auxiliarv	

TO THE OFFICERS OF THE POLICE EMERALD SOCIETY OF THE WASHINGTON, D.C. AREA:

I, THE UNDERSIGNED DO HEREBY ATTEST TO BE OF GAELIC DESCENT AND MAKE APPLICATION FOR MEMBERSHIP IN THE POLICE EMERALD SOCIETY. FURTHER, IT IS UNDERSTOOD THAT ACCEPTANCE IN THE POLICE EMERALD SOCIETY DOES NOT IN ANY WAY PROTECT THE MEMBER AGAINST VIOLATIONS OF THE LAW, NOR HAS THE MEMBER BEEN PROMISED ANY FAVORS OF IMMUNITY BY ANY LAW ENFORCEMENT OFFICER. I PROCLAIM TO BE OF GOOD MORAL CHARACTER AND A LAW ABIDING CITIZEN OF THE UNITED STATES. BOARD OF DIRECTORS MAY REQUEST VERIFICATION OF TYPE OF MEMBERSHIP A PERSON IS APPLYING FOR.

Signature:	Date:	
Beneficiary Name:	Relation:	
Address:	Phone:	

Make checks payable to: Police Emerald Society or PES

Membership Dues: Annually = \$30.00 (ACTIVE/ASSOCIATE) Annually = \$60.00 (AUXILIARY)

Membership Year Commences – January Annually