

# La Porte Citizens Police Academy Alumni Association

## 2013 Membership Application/Renewal



### Annual Dues

\$24.00 Individual, \$40.00 Husband & Wife Paid Together

Submit completed forms to:

**LPCPAAA**

**P.O. Box 1544 La Porte, TX 77572-1544**

**ATT: Vicky Copley**

Please *Print Clearly* all information

DATE: \_\_\_\_\_ GRADUATE OF CLASS: \_\_\_\_\_

NAME: \_\_\_\_\_ DOB: (MM/DD/YY) \_\_\_\_\_

NAME: \_\_\_\_\_ DOB: (MM/DD/YY) \_\_\_\_\_

STREET: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE: (HOME) \_\_\_\_\_ (CELL #): \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

AMOUNT PAID: \$ \_\_\_\_\_ (CASH) : \_\_\_\_\_ ( CHECK #): \_\_\_\_\_

Make checks payable to the (LPCPAAA)

We maintain a member Directory for purposes of sharing business related materials and notifications. If you do not wish to be included in this directory please indicate below. (Please check box below)

PUBLISH TO ASSOCIATION MEMBERS

KEEP CONFIDENTIAL

#### CONTACT INFORMATION

NAME: \_\_\_\_\_

STREET: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE (HOME) \_\_\_\_\_ (SECONDARY #) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

FACEBOOK ID: \_\_\_\_\_