



DeKalb Fraternal Order of Police

William E. Peacock, Jr. Lodge #10
1238 Ridge Avenue
Stone Mountain, Georgia 30083

2018 Application for Membership/Member Update Form

MEMBER INFORMATION (Please fill out completely and legibly)

Name [Last, First, Middle Initial]

Home Phone

Street Address

Mobile Phone

City, State, Zip

Date of Birth / /

Email Address (NON-WORK) @

Year joined Fraternal Order of Police

Agency, Division, and Precinct

Retired? (YES NO) If yes, date retired? / /

Notes to Members:

The DeKalb Fraternal Order of Police utilizes an email service in order to disseminate Lodge news and information to its Members. You do have the option to unsubscribe from this service (link is at the bottom of each email), but you risk missing important information pertinent to you.

If you need to update your beneficiary information, obtain a new beneficiary form from our website. It is the responsibility of the Member to keep the information current with the Lodge Secretary.

Dues: Member dues are \$120 yearly for Active (employed) members, Retired members, and Post Retired. Dues may now be paid using several methods. In addition to the usual check/money order option, you may also pay by credit card or by automatic monthly bank draft. Pick the method that works best for you.

- Check/Money Order** – mail in your check or money order (payable to DeKalb FOP) along with this completed form. New applicants should refer to the chart to the right to determine the proper dues.

Jan 1-March 31	\$120.00
Apr 1-June 30	\$90.00
July 1-Oct 31	\$60.00
Nov 1-Dec 31	2019 dues

- Monthly Bank Draft (ACH)** – complete the ACH Authorization Form and mail with this completed form. Get the authorization form online at <http://dekalbfop.org/membership>. ****Effective immediately: in the event an ACH debit is returned unpaid (i.e. insufficient funds), you will be charged \$4.25. After two debits returned unpaid within a calendar year, you will be removed from the ACH option. The remaining dues balance (and any unpaid fees) will be due by check, money order, or PayPal within 30 days of notification.**
- PayPal/Credit Card** – go to <http://dekalbfop.org/membership> and follow the instructions for online payment. Make sure to keep your confirmation email from PayPal. Once completed, mail in this completed form. New applicants should refer to the chart to the right to determine the proper dues.

X
Signature

Date: _____

*****See reverse side for additional information*****

Fraternal Order of Police

William E. Peacock, Jr. DeKalb Lodge #10

1238 Ridge Ave. Stone Mountain, Ga. 30083

www.dekalbfop.org

I, the undersigned, a full-time, regularly employed law enforcement officer or retired law enforcement officer, agree to be bound by the following obligation of the Order:

OATH OF OBLIGATION

I, _____, in the presence of the Creator of the Universe, and the members of the Fraternal Order of Police here assembled, do most solemnly and sincerely promise and swear, that I will, to the best of my ability, comply with all the Laws and Rules of this Order: that I will recognize the authority of my legally elected officers and obey all orders there from, not in conflict with my religious or political views, or my rights as an American Citizen: that I will not cheat, wrong or defraud this order, or any member thereof, or permit the same to be done if in my power to prevent it: that I will at all times aid and assist a worthy Brother or Sister in sickness or distress, so far as it lies in my power to do so: that I will not divulge any of the secrets of this Order to anyone not entitled to receive them. To all of which I most solemnly and sincerely swear. Should I violate this, my solemn oath and obligation, I hereby consent to be expelled from this Order.

I have read and understand the Oath of Obligation of the Fraternal Order of Police printed above. I have affixed my signature below as receiving and agreeing to such obligation, also I hereby agree to return to the lodge my membership card and any other materials bearing the Fraternal Order of Police (F.O.P.) insignia if instructed to do so.

Signature of Applicant: _____

Date: _____

Office Use Only

Date Form Received:	Received by:	
Payment Method:	Amount:	

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