



# Oklahoma Association of Chiefs of Police

## APPLICATION FOR MEMBERSHIP

# 2011



PLEASE COMPLETE IN FULL

Name \_\_\_\_\_

( Print full name)

CLEET ID# \_\_\_\_\_

Nickname: \_\_\_\_\_

DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Agency \_\_\_\_\_

Title or Position \_\_\_\_\_

Office Email \_\_\_\_\_ Home Email \_\_\_\_\_

Address: Mail Correspondence to: Business \_\_\_\_\_ Residence \_\_\_\_\_

Street \_\_\_\_\_ P.O. Box: \_\_\_\_\_

Street

Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

(Area Code/Number)

City \_\_\_\_\_ State \_\_\_\_\_ Zip + 4 \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

(Area Code/Number)

Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

(Area Code/Number)

Residence \_\_\_\_\_ P.O. Box: \_\_\_\_\_

Street

Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

(Area Code/Number)

City \_\_\_\_\_ State \_\_\_\_\_ Zip+ 4 \_\_\_\_\_

Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

(Area Code/Number)

New Membership    Renewal    Corporate    Active    Associate

If new Member please list endorsed by: \_\_\_\_\_

Active Member's Name

Agency

Amount Due: Active or Associate Member: \$60.00 Corporate Member \$500.00

How Paid: Cash \_\_\_\_\_ Personal Check \_\_\_\_\_ P.O.# \_\_\_\_\_

VISA \_\_\_\_\_ MasterCard \_\_\_\_\_ Discover \_\_\_\_\_ Card Number \_\_\_\_\_ Exp. \_\_\_\_ / \_\_\_\_

Please check here if this is an agency credit card: Exact Name on Card: \_\_\_\_\_

Mail/Fax Application to: Oklahoma Association of Chiefs of Police  
1141 N. Robinson Avenue, Suite 200  
Oklahoma City, Ok. 73103

Phone: 405672-1225 FAX: 405670-8763 Toll Free: 1-888-528-6227 Email: chiefs@okla-chiefs.org