

ACTIVE MEMBERSHIP PETITION

FRATERNAL ORDER OF POLICE

TENNESSEE STATE LODGE

Name: \_\_\_\_\_ S.S. # \_\_\_\_\_  
 Street: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 City: \_\_\_\_\_ ZIP: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Employed by: \_\_\_\_\_ Employed Date: \_\_\_\_\_  
 Department: \_\_\_\_\_ Rank: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Death Benefit Beneficiary: \_\_\_\_\_ Spouse: \_\_\_\_\_

I, \_\_\_\_\_, certify that I am a full time Law Enforcement Officer of a Municipal, State or Federal Government. I understand that any false information will be grounds for expulsion form the Lodge, Fraternal Order of Police.

\_\_\_\_\_  
 Signature Date

I, Don Hollie, Secretary of Lodge # 35 hereby state to the best of my knowledge the above is entitled to be a member of the Fraternal Order of Police as stated on page 3 of the State Lodge Constitution and By-Laws.

\_\_\_\_\_  
 Signature Date

I, Danny Renshaw, President of Lodge A# 35 hereby state to the best of my knowledge the above is entitled to be a member of the Fraternal Order of Police as stated on page 3 of the State Lodge Constitution and By-Laws.

Danny Renshaw  
 Signature Date

Attention Local Lodge Secretary: Upon acceptance of members into your lodge, you are required to submit this form to the State Lodge along with your Loses and Gains in membership form. Members listed on Loses and Gains forms will not be accepted unless accompanied by this form.

State Lodge Received: \_\_\_\_\_