

Northern California Peace Officers Association

MEMBERSHIP APPLICATION

GENERAL MEMBERSHIP: General Membership is limited to qualified candidates who have been employed in a law enforcement or public safety position and meet at least one of the following requirements:

- ☆ Any person who serves or has served full time in a peace officer position defined in §830 et seg of the California Penal Code
- ☆ The California Attorney General or any California District Attorney and/or deputies (current or former)
- ☆ Any member of the California Judiciary (current or former)

P. O. Box 1267

Highest Rank, Position or Title:

Other Law Enforcement/Public Safety Experience:

Membership

Applicants Only

☆ Any person who serves or has served in a full-time capacity equivalent to a position defined in §830 et seq of the California Penal Code for a federal agency or a public agency in any state or territory of the United States. Position equivalency shall be determined by the Board of Directors.

ASSOCIATE MEMBERSHIP: Associate Membership is available for persons who support law enforcement and public safety and who are sponsored by a current NCPOA member in good standing. Associate Members do not have voting privileges and may not serve in an elected position on the Board of Directors.

HOW TO APPLY: Complete the appropriate sections of this application (include copies of identification as needed). All information provided will be considered <u>confidential</u> and will not be shared with any other entity. Final approval of each application will be decided by the Board of Directors.

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rectors.				
	☆ Include a check for \$30.00 made payable to NCPOA to cover dues for the current fiscal year (July-June)			
	☆ Mail to: NCPOA			

Yuba City, CA 95992

Full Name

Last Name: First Name:

Mailing
Address

City / State / Zip

Primary
Contact Phone
include Area Code

Email Address

Law Enforcement/Public Safety Agency Employer:

check one: □Current □Retired □Past Employer Please include a photocopy of your active or retired agency-issued identification

Sponsoring Member:

ASSOCIATE	Please explain your qualifications for membership based upon the requirements listed above.
Membership	
Annlicants	
Applicants Only	Sponsoring Member
Only	

SIGNATURE	DATE: