

**NYSFOP Picture ID ACTIVE MEMBER
FOR THE YEAR 2011**

Date _____

First Year **\$10.00** Renewal

PLEASE PRINT INFORMATION

PICTURE# or FILE _____

Last Name _____

First Name _____

Address _____

City _____ State _____ Zip _____

DOB _____ Nat'l Membership# _____

Lodge# _____

Telephone# _____

E-mail _____

Signature _____

Must have Police ID attached First Year