Minnesota State Lodge
Fraternal Order of Police

Application for Membership

To the Officers of the Fraternal Order of Police

I, the undersigned, a full-time licensed, employed law enforcement officer, do hereby make application for active membership in Glacial Lakes Fraternal Order of Police Lodge 23.

If my membership should be revoked or discontinued for any cause other than retirement while in good standing, I do hereby agree to return to the lodge my membership card and any other material bearing the FOP insignia, such as auto emblem, lapel pin, etc.

Applicant Name_____ **Date of Birth**_____

Address _____

City _____ **State** _____ **Zip** _____

Employer _____ **Position/Assignment** _____

Work Number _____ **Home Number** _____

Cell Phone _____ **E-mail** _____

Signed _____ **Date** _____

For Lodge use only

Received by _____ Title _____

Signed _____ Date _____

Lodge Dues are $50 for the calendar year.

Please return completed application and payment to:
Glacial Lakes Fraternal Order of Police Lodge 23
Po Box 91
Glenwood, MN 56334
Info@mnfop23.com

Or

Form and Payment can be completed at:
https://mnfop23.com/forms/fopannualduesform