



ANNUAL MEMBERSHIP APPLICATION
Monterey County Peace Officers Association
 PO Box 1823, Monterey CA 93942

<i>OFFICE USE ONLY</i>	
RECEIVED:	_____
ENTERED:	_____
CARD MAILED:	_____

CALIFORNIA DEPARTMENT OF CORRECTIONS (CTF-SOLEDAD & SALINAS VALLEY STATE PRISON) MEMBERSHIP
\$20.00/person

Name: _____

Address, City, Zip: _____

Phone (Office, Home or Cell): _____

Add me to Email Mailing List – Email Address: _____

Do not add me to Email Mailing List (MCPOA Lawman Newsletter, announcements, etc)

Monterey County Agency Affiliation: _____

Position/Job Title: _____

Membership Renewal

New Membership

STATUS:

Active **Currently Employed**

Retired **[Include copy of Agency Retired ID Card, If newly Retired]**

TYPE OF MEMBERSHIP:

Regular Member (Sworn)

Associate (Non-Sworn)

Donation: \$10.00 \$20.00 Other \$ _____

TOTAL PAYMENT ENCLOSED \$ _____

*Donations most welcome to help defray the costs associated with administrative expenses.
 MCPOA is a registered 501c(4).*

PAYMENT BY CHECK/MONEY ORDER/CREDIT CARD

CREDIT CARD (VISA / MASTERCARD / AMERICAN EXPRESS) #: _____

Expiration Date: _____ Security Code: _____

Billing/Mailing Address & Zip Code (if different from above): _____

Signature of Authorized Credit Card Holder

Date

NOTE: Information provided within your application is not shared or distributed – all remains Confidential and is only for use by MCPOA.