



DUPAGE COUNTY CHIEFS

OF POLICE ASSOCIATION

Incorporated under the laws of the State of Illinois

March 21, 1963

NAME: _____ TITLE: _____

RENEWAL/MEMBER SINCE _____ NEW MEMBER/DATE OF APPOINTMENT _____

DEPARTMENT/AGENCY/COMPANY _____

BUSINESS ADDRESS: _____

BUSINESS PHONE: _____ Street _____ City _____ Zip Code _____
 FAX: _____ CELL: _____

E-MAIL ADDRESS _____ NEXTEL CODE: _____
 (OPTIONAL)

HOME ADDRESS: _____ Street _____ City _____ Zip Code _____

HOME PHONE: _____ FAX: _____

PLEASE SEND ASSOCIATION MAIL TO: OFFICE HOME E-MAIL ADDRESS

I HEREBY MAKE APPLICATION FOR MEMBERSHIP IN ACCORDANCE WITH THE PROVISIONS OF THE BY-LAWS AND CONSTITUTION OF SAID DUPAGE COUNTY CHIEFS OF POLICE ASSOCIATION FOR THE FOLLOWING CLASSIFICATION OF MEMBERSHIP:

- ACTIVE:**
 CHIEFS, COMMISSIONERS, SUPERINTENDENTS, DIRECTORS, HAVING ACTUAL SUPERVISION OF AND RECEIVING SALARIES FROM ANY LEGALLY CONSTITUTED STATE, COUNTY OR MUNICIPAL POLICE DEPARTMENT – HEADS OF ALL FEDERAL AGENCIES HAVING AUTHORITY TO ENFORCE POLICE REGULATIONS UNDER THE LAWS OF THE UNITED STATES – COMMANDERS OF THE STATE POLICE DISTRICTS HAVING NORMAL POLICE JURISDICTIONS WITHIN THE COUNTY OF DUPAGE – SHERIFF, STATE’S ATTORNEY, EXECUTIVE OFFICERS OR RAILROAD POLICE HAVING SYSTEMS WITHIN DUPAGE COUNTY, CORONER, CHIEF DEPUTY SHERIFF, CHIEF INVESTIGATOR FOR THE STATE’S ATTORNEY, EXECUTIVE HEADS AND DIVISION OR BUREAU COMMANDER OFFICERS OF SUCH DEPARTMENTS ONLY WHEN RECOMMENDED FOR SUCH MEMBERSHIP BY THE CHIEF OF POLICE OR OTHER COMMANDING OFFICER ANNUALLY, CIRCUIT COURT CLERK, SUPERVISOR OF COURT CLERKS AND CHIEF MAGISTRATE OF THE 18TH JUDICIAL COURT – ANY ACTIVE MEMBER WHO HAS BEEN DULY RETIRED OR PENSIONED.
- ASSOCIATE:**
 HEADS OF SECURITY STORES, RESIDENT AGENTS OF ALL FEDERAL AGENCIES, CHIEF DEPUTY CORONER, PERSONS KNOWN TO BE A CONSISTENT ADVOCATE OF LAW ENFORCEMENT WHO MAY DESIRE TO LEND THEIR AID TO THE FORCES ENGAGED IN THAT PURSUIT, REPRESENTATIVES OF COMMERCIAL COMPANIES DEALING IN POLICE SERVICES OR SUPPLIES.

NEW ACTIVE MEMBERS: YOU MUST BE RECOMMENDED BY AND OBTAIN THE SIGNATURE OF THE CHIEF OF POLICE OR OTHER COMMANDING OFFICER OF YOUR AGENCY.

RECOMMENDED BY: _____
 Signature

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| Enclose 2017 dues of \$275.00 and mail to: DuPage County Chiefs of Police Association c/o Filomena Lehman Addison Police Department 3 Friendship Plaza Addison, IL 60101 | Dues Received: |
| | Executive Approval: |
| | Membership Approval: |
| | President’s Signature: |