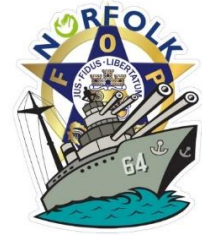




**Auxiliary of  
Commodore Lodge No. 3  
Fraternal Order of Police  
Norfolk, Virginia**



**Application for Membership**

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Birthday: \_\_\_\_\_

FOP Member: \_\_\_\_\_  
Last First Middle

Relationship to FOP Member: \_\_\_\_\_

Yearly dues are \$25.00, due upon initiation.

\*\*\*NOTE\*\*\* Initiation is not finalized until you swear in at an Auxiliary meeting.

\_\_\_\_\_  
Applicant signature

Return application to an Auxiliary member or mail to:

FOP Commodore Lodge #3 Auxiliary  
1111 Harmony Road  
Norfolk, VA 23502

\_\_\_\_\_  
*Initiation Date:*