

German-American Police Association of Chicago

www.GAPACHicago.org

Membership & Renewal Application

(please print clearly)

Please Check the Appropriate Box:

ACADEMY AND PROBATIONARY OFFICERS FREE FOR THEIR FIRST YEAR

☐ **New Membership**

☐ **Renewal Membership**

MEMBERSHIP CLASSIFICATIONS - PLEASE CHOOSE ONE

_____ Academy and/or Probationary Officers **First Year Free**

_____ Active or Associate Membership \$30.00 (Under 25 years of consecutive membership)

_____ Active or Associate Membership-Four Year Membership Plan \$100.00 (save \$20.00)

_____ Gold Active or Associate Membership \$20.00 (Must have 25 years or more consecutive membership)

Last Name		First Name		MI
Street Address		City	State	Zip
Home Telephone	Cell Phone		Work Phone	
Department/Agency				Badge/ID Number
Email address (request personal email as some agencies/departments block incoming messages)				
Father's Name:		Ethnic Origin:		
Mother's Name;		Ethnic Origin:		
Applicant's signature			Date (mm/dd/yyyy)	
Sponsor's Name		2nd Sponsor Name (Associate Member Only)		

Payment by check or money order to:

G.A.P.A. Chicago
4740 N. Western Ave.
Chicago, IL 60625

(for mailed applications, please include copy of Department/Agency identification)

Associate Member Application requires two (2) sponsors.
Applicants agree to abide by all Association Rules and By-Laws.
All applicants are subject to review by the Association Board of Directors.

☐ Board Approved on _____ ☐ Treasurer received funds on _____ ☐ Membership info entered on _____

Membership renewal is due yearly beginning January 1st.

Failure to renew by March 31st will result in being dropped from membership roles.