



NATIONAL ASSOCIATION OF CHIEFS OF POLICE

Supporting and Promoting the Law Enforcement Profession Since 1967

Membership Application

Full Name _____ Rank _____

Organization Name _____

Mailing Address _____ Apt. No. _____

City _____ State _____ Zip _____

Phone _____

Email address _____

Please make your selection from the following:

- | | | | |
|--------------------------|----------|---|----------|
| <input type="checkbox"/> | Basic | *** 12 MONTHS MEMBERSHIP
Includes a subscription to CHIEF OF POLICE MAGAZINE | \$60.00 |
| <input type="checkbox"/> | Option 1 | *** 24 MONTHS MEMBERSHIP
Includes a subscription to CHIEF OF POLICE MAGAZINE | \$110.00 |
| <input type="checkbox"/> | Option 2 | *** 36 MONTHS MEMBERSHIP
Includes a subscription to CHIEF OF POLICE MAGAZINE | \$155.00 |
| <input type="checkbox"/> | Lifetime | Lifetime Membership | \$500.00 |

Return your membership application to:

National Association of Chiefs of Police
6350 Horizon Drive
Titusville, FL 32780

Make checks payable to: NACOP

VISA MasterCard American Express

Discover Check/M.O.

Credit Card # _____

Expiration Date ____ - ____ Amount \$ _____

Signature _____

Membership benefits include:

- Subscription to Chief of Police Magazine
- Free admission to the American Police Hall of Fame & Museum
- Discounts at the APHF Shooting Center
- Awards Program
- Participation in the annual law enforcement survey
- Opportunities for training and education