

# FORMER TROOPERS ASSOCIATION



## MEMBERSHIP APPLICATION ASSOCIATE MEMBERSHIP

- INITIAL  
 RENEWAL

I hereby make application for membership in the Former New Jersey Trooper's Association, Inc., in accordance with the Constitution and By-Laws of the Association.

\*Full Name \_\_\_\_\_  
\*Address/ Street \_\_\_\_\_  
\*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip Code \_\_\_\_\_  
\*Email Address \_\_\_\_\_ \*Telephone \_\_\_\_\_ DOB \_\_\_\_\_

### PLEASE ONLY CHECK ONE TYPE OF MEMBERSHIP

Regular Associate Member:

Related to Former Trooper \_\_\_\_\_ Badge # \_\_\_\_\_

Relationship:  Spouse  Son  Daughter  Stepson  Stepdaughter

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 Civilian Associate Member: (Minimum 10 years of service to NJSP)

Date of Employment NJSP: \_\_\_\_\_ Date Retired NJSP: \_\_\_\_\_  
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Active Enlisted Associate Member: Badge # \_\_\_\_\_

\*Applicant's Signature \_\_\_\_\_ \*Date \_\_\_\_\_

Mail this Application with a check made payable to the F.T.A. for the Initiation Fee (if applicable), Reinstatement Fees (if applicable for reinstatement), and current Annual Dues to:  
NJ Former Troopers Association, PO Box 7852 West Trenton, NJ 08628

Dues: \$30.00 1 Year or \$80.00 3 Years. Initiation Fee: \$10.00 Reinstatement Fee: \$10.00

\*Information Required Total Amount Submitted: \$ \_\_\_\_\_

Please report any changes in the above information promptly in writing to the FTA Office.

DO NOT WRITE BELOW THIS LINE. FTA USE ONLY

Dues Received \_\_\_\_\_ Date Approved \_\_\_\_\_ New Member Package Sent \_\_\_\_\_

Revised: September 2011