



# CENTRAL NEW YORK

Association of Chiefs of Police

## 2007 Dues Invoice & Membership Information Sheet

Name: \_\_\_\_\_ Rank \_\_\_\_\_

Employing Agency \_\_\_\_\_ Continuous member since: \_\_\_\_\_

Address \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Home Address \_\_\_\_\_

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

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

Membership Status	Check One	Amount Due
Active	_____	\$50.00
Associate	_____	\$50.00
Retired Active	_____	\$25.00
Retired Associate	_____	\$25.00
Retired Active (Over 62)	_____	\$0.00 – MUST SUBMIT THIS APPLICATION
Honorary Member	_____	\$0.00 – MUST SUBMIT THIS APPLICATION
Life Member (20 years)	_____	\$0.00 – MUST SUBMIT THIS APPLICATION
Thank You but I no longer desire membership	_____	

Please send mailings to my: E-MAIL HOME EMPLOYMENT

Members Signature \_\_\_\_\_

PLEASE REMIT PAYMENT BY FEBRUARY 6, 2006 TO  
CNYACOP, P.O. BOX 2123, AUBURN, NY 13021-1059