

NEW HANOVER COUNTY LAW ENFORCEMENT OFFICERS ASSOCIATION

P.O. Box 7501 Wilmington NC 28406



MEMBERSHIP RENEWAL FORM

All Blanks Must Be Filled In LEGIBLY

| Name: | | | | | // |
|---|--|--|--|--|--|
| (Last) | | (Jr/Sr) | (First) | (MI) | (DOB) |
| Nickname | | Key # | Card # | | |
| Address: | | | | | |
| City, State, Zip: | | | | | |
| Phones:(Home) | (C.11) | | (E.M. 11) | | |
| (Home) | (Cell) | | (E-Mail) | | |
| Concealed Carry Perm | it Number | | Expiration | on Date | |
| Current Employer: | | | Position: | | |
| Preferred Committee | (s): (Please Ch | eck) | | | |
| Kitchen: Range: _ | Building: _ | Grounds: _ | Activities: _ | Members | ship: |
| | VISIT YOU | UR ASSOCIA | TION WEB SIT | E | |
| | W | WW.NHCLEO | DA COM | | |
| As a member of the NHo to attend general meeti of continued membersh submit a Waiver Reques my KEY or MEMBERSHIF Rules may result in the lo understand and will cor | ngs and perform lip. If I am unable st in writing to th P/RANGE ACCES less of my Range P | at least (2) two e to meet the at e Board of Dire S CARD or willfu rivileges and / o | o approved work tendance or work ectors. I am awar ull violation of the r my Membership. | days per yea k day require e that duplic Range Regula | r as a condition ements, I must ating or loaning ations or Safety |
| Signature: | | | Date: | | |
| Dues: \$100.00 | Assessmen | ts: | | Total: | |
| ADMI | NISTRATIVE U | SE ONLY: D | o Not Write in t | his Section | ı |
| Membership Type: A | ctive () Associa | ate () Specia | l() Other | | |
| Total Received: | Dat | te Rec: | Rec & | Approved 1 | Ву: |
| | | | | | |