NEW HANOVER COUNTY
LAW ENFORCEMENT OFFICERS ASSOCIATION

P.O. Box 7501

Wilmington NC 28406

MEMBERSHIP RENEWAL FORM 2027

MEMBER INFORMATION

- Name: Last: _____ First: _____ DOB_____
- E-mail: _____@_____.com
- Address: _____
- City, State, Zip: _____NC _____
- Phone: (_____)_____-_____ I Agree to receive text messages with emails _____

MEMBERSHIP AGREEMENTS

- To continue my membership, I acknowledge that I have read, understood and agree to comply with the NHCLEOA Constitution, By Laws, Range Regulations, and Safety Rules.
- I will participate in at least two (2) general meetings and complete 12 hours of approved workdays annually. If unable to meet this obligation, I understand a fee of up to $25/hr will be charged at renewal for 2028. For medical or other valid reasons preventing my participation, I will submit a written Waiver Request to the Board of Directors by January 1st.
- I understand that lending or duplicating my key or range access card to nonmembers, or any intentional violation of regulations, may result in termination of my membership.

WAIVER AND HOLD HARMLESS AGREEMENT

I agree to defend, indemnify, and hold harmless the NHCLEOA for any negligent careless actions(s) resulting in death, injury, property damage/loss which NHCLEOA may suffer as a result of myself or my guest through:

- Handling firearms or other weapons
- Use of NHCLEOA firearms or archery ranges
- While on NHCLEOA property

SIGNATURE & MEMBERSHIP TYPE

Signature: _____ Date: _____/_____/2027

Membership Type: Active ( ) Special ( ) Life ( ) Honorary ( )

ADMINISTRATIVE USE ONLY

- Dues: $150.00 Assessments: $_____ Total: $_____
- Total Received: $_____ Date Received: _____/_____2027
- Cash ( ) Check #_____ Received by: _____

*Updated November 2026