

**NYSFOP Picture ID ACTIVE MEMBER
FOR THE YEAR OF 2018**

Date _____

First Time **\$15.00** Renewal

Disc Photo# Sent by E-Mail Use Photo
on file

PLEASE PRINT INFORMATION

Last Name _____

First Name _____

Address _____

City _____ State _____ Zip _____

DOB _____ Nat'l Membership# _____

Lodge# _____

Telephone# _____

E-mail _____

Signature _____

Must have Police ID attached First Time