



# RHODE ISLAND GUARDIANS ASSOCIATION GENERAL APPLICATION FOR MEMBERSHIP

All applications for membership, regardless of class, may be considered at any regularly scheduled or special meeting of the General Body. All required membership fees must be paid in full prior to final approval of application.

**PLEASE INDICATE MEMBERSHIP LEVEL APPLYING FOR.**

## MEMBERSHIP CLASSIFICATIONS

<b>SECTION A</b>	<input type="checkbox"/> Active Member	Available to those active duty or retired sworn law enforcement officers who have served with any law enforcement agency within the State of Rhode Island	<b>\$50.00 yearly</b>
	<input type="checkbox"/> Associate Member	Institutional public safety personnel, non-sworn law enforcement persons employed in throughout the State who are interested in furthering the goals of the association	<b>\$25.00 yearly</b>
	<input type="checkbox"/> Supporting Member	Persons within the general community who have shown or demonstrated compatibility with the mission, goals and principles of the Association	<b>\$10.00 yearly</b>

<b>SECTION B</b>	Name: _____
	Mailing Address: _____
	City _____ Zipcode _____
	Email Address: _____
	Daytime Phone: _____ Cell: _____
	Signature: _____

**FOLLOWING INFORMATION REQUIRED FOR ALL APPLICATIONS FOR ACTIVE MEMBERSHIP.**

**FOLLOWING INFORMATION REQUIRED FOR ALL APPLICATIONS FOR ASSOCIATE-MEMBERSHIP.**

<b>SECTION C</b>	_____ Law Enforcement Agency		
	_____ Your Title/Rank		
	_____ Agency Address		
	_____ Agency Phone	_____ Years of Service	
	Current Status	<input type="checkbox"/> Active Duty	<input type="checkbox"/> Retired

<b>SECTION D</b>	_____ Public Safety Agency	
	_____ Your Title/Rank	
	_____ Agency Address	
	_____ Agency Phone	_____ Years of Service

**Reason For Wanting Membership**

<b>SECTION E</b>	
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All applications for membership should be returned, along with check/money order for application dues, payable to **RHODE ISLAND GUARDIANS ASSOCIATION, P.O. Box 113854, N. Providence, RI 02911-9998 Attn: Membership Committee**. Inquiries regarding application status should be directed by email to [information@riguardians.org](mailto:information@riguardians.org)

### RI GUARDIANS USE ONLY

<b>SECTION F</b>	_____ Date Received	_____ Date Contacted	_____ President
	_____ Date Submitted For Approval	Application Fee Received <input type="checkbox"/>	_____ Chair, Membership Committee
		Approved <input type="checkbox"/> Rejected <input type="checkbox"/>	_____ Secretary