



**LOWER CAPE FEAR LODGE  
P.O. BOX 1056  
WILMINGTON, NORTH CAROLINA 28405**

**APPLICATION FOR ACTIVE MEMBERSHIP**

**To the Brothers and Sisters of the Lower Cape Fear Lodge #58, Fraternal Order of Police:**

**I, the undersigned, a full-time, regularly employed, sworn, law enforcement officer, or an honorably retired law enforcement officer do hereby make application for Active Membership in Lower Cape Fear Lodge #58.**

**If my membership should be discontinued for any cause, I do hereby agree to return said Lodge my membership card and any other material bearing the FOP insignia, such as auto emblem, lapel pin, etc.**

**OBLIGATION**

**I, the undersigned, in the presence of the Creator of the Universe and the members of the Fraternal Order of Police here assembled, do most solemnly and sincerely promise and swear, that I will to the best of my ability comply with all the laws and rules of this Order; that I will recognize the authority of my legally elected officers and obey all orders therefore not in conflict with my religious or political views, or my right as an American citizen; that I will not cheat, wrong, or defraud this Order, or any member thereof, or permit the same to be done if in my power to prevent it; that I will at all times aid and assist a worthy Brother (or Sister) in sickness or distress, so far as it lies in my powers to do so; that I will not divulge any of the secrets of this Order to any one not entitled to receive them. To all of which I most solemnly and sincerely promise and swear. Should I violate this, my solemn oath or obligation, I hereby consent to be expelled from the Order.**

(signed) \_\_\_\_\_ Date \_\_\_\_\_

Please Type or Print

Full Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Email address \_\_\_\_\_

Department \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Beneficiary \_\_\_\_\_  
(Full Name)

**Dues are \$ 150.00 per year and are due November 1 of each year.**