

North Carolina Association of Chiefs of Police Application for Membership

Date: _____

Full Name: _____

Title: _____

Agency: _____

Work Address (Mailing): _____

City, State, Zip: _____

Home Address (Mailing): _____

City, State, Zip: _____

Work Telephone: _____ Mobile Telephone: _____

Fax Number: _____ E-Mail Address: _____

County: _____ Region: _____

TYPE OF MEMBERSHIP

- _____ **Active-Voting Members**- Any N.C. sworn, full-time, Chief of Police of any municipality, any county, or, any campus law enforcement agency (established pursuant to G.S. §116-40.5 and G.S. §115D-21.1) or any salaried Agent in Charge of any state, federal or tribal law enforcement agency with the powers of arrest and assigned to duty in the State of North Carolina; or any level II campus law enforcement agency Chief accredited by the Southern Association of Colleges and Universities when such campus law enforcement agency is administered and governed solely by the College or University.
- _____ **Professional Non-Voting Members** - Any full-time salaried member of the aforementioned agencies in (a.) above with a minimum rank of Captain or the equivalent; or any sworn chief officer of a special or company police agency regulated by Chapter 74E of the North Carolina General Statutes; or any N.C. Sheriff or command-level N.C. Deputy Sheriff. Professional Non-Voting Members shall not vote or hold office.
- _____ **Associate Non-Voting Members** - The Association by majority vote of the Board of Directors may grant associate membership to any individual or organization that is dedicated to the advancement of the objects of the Association. Individual Associate members shall pay the same annual dues as Professional members of the Association. Organizational associate members shall pay annual dues as established by the Board of Directors. Associate members shall not hold office or have voting privileges.

STATEMENT OF PURPOSE: The North Carolina Association of Chiefs of Police was created to: provide a favorable environment in which the Chiefs of North Carolina may educate and improve themselves professionally; recognize outstanding achievements in their profession and association and its allied groups through researching and distributing information and maintaining a resource contact system of its members; conduct meetings; and retain competent counsel to advise and represent the membership and its interests. This is to be financed through a combination of reasonable dues and from revenues generated by meetings and seminars.

Annual Dues: \$150 Active Voting Member - \$100 Professional and Associate Member

Make Checks Payable To: NCACP

Mail Application To: NCACP - PO Box 18729 - Raleigh NC 27619

I hereby certify that I am a North Carolina duly sworn, full-time, salaried Chief of Police of any municipality, any county, or any campus law enforcement agency. I, therefore, apply for active membership in the North Carolina Association of Chiefs of Police pursuant to the applicable provisions of the Constitution and Bylaws.

Signature of Applicant: _____

Where do you prefer to have your correspondence mailed? Home _____ Office _____

FOR OFFICE USE		
Approved: _____ <div style="text-align: center; margin-top: 10px;"> Bill Hollingsed Executive Director </div>	Date Received:	
	Amount Paid:	