



Application for Membership

Name: _____

Address: _____

Phone: _____ Email: _____

Birthday (month/day) _____

Facebook Name _____

Referred by a current member - Name?: _____

Name of Spouse: _____

Agency Spouse currently works for: _____

Years of Service in current agency _____ Total Years in Law Enforcement _____

Marriage/Relationship Anniversary Date: _____

Number of Children _____ Ages: _____

Current Affiliations (clubs, churches, schools etc.): _____

Do you have a specific area of the organization that you are interested in participating (fundraising, community outreach, board of directors, public relations, social events)?

Photo Release:

I hereby grant BadgeWives of Tampa Bay Inc. the right to take photographs of me, my spouse, significant other and children, if applicable during any group events that I am present for. I agree that BadgeWives of Tampa Bay Inc. may use such photos for any lawful purpose, including for example such purpose as publicity, illustration, advertising and web content.

I will make no monetary or other claim against the Photographers / BadgeWives of Tampa Bay Inc. for the use of the photograph(s).

"I agree to pay the annual membership fee of \$30 to join BadgeWives of Tampa Bay Inc., to be an active member and to abide by the Bylaws. I also agree when collecting donations on behalf of BadgeWives whether monetary or tangible goods, that I am required to turn them into the organization. My signature also authorizes BadgeWives of Tampa Bay Inc. to verify my law enforcement affiliation if necessary"

Signature _____

BadgeWives of Tampa Bay Inc.

PO Box 2251

Land O Lakes, Florida 34639

Email/PayPal: BadgeWivesMembership@gmail.com

For Board Members Use Only:

Date received: _____ Membership Dues received by: _____ Cash or Check #: _____