ALABAMA ASSOCIATION OF CHIEFS OF POLICE
P.O. Box 211285 | Montgomery, AL 36121
334.207.2712 | 334.730.8065 | www.AACOP.com

LIFETIME AACOP Member Application

Lifetime Membership requires 5 years service as an active chief in good standing and sponsorhip by an active AACOP member.

(email this form to jroy@aacop.com)

Date Submitted _____Title_____

Full Name _____

Department/Agency_____

Mailing Address _ _____

City_____ State _____ Zip _____

County_____ AACOP District_____ Date Appointed __**_____**

Work Phone _____Cell _____ Date Retired _____

Email _____

Name of active member sponsor: _____

Department/Agency_____

Work Phone _____Cell _____

Email _____

AACOP OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE

Date Received____/___/_____ Date Processed____/___/_____ Payment #_____
Initials