 

**New Hampshire Association of Chiefs of Police, Inc.
One Municipal Drive**

**Derry, NH 03038**

**MEMBERSHIP APPLICATION**

*I wish to become a member of the New Hampshire Association of Chiefs of Police and to be entitled to all benefits, privileges, and services of the Association.*

**Type of Membership Name: **

**Active Title: **

**Professional Associate Agency Name: ****Business Address: **

 **Street: **

 **City, State, Zip: **

 **Email Address: **

**Sponsor:**

  

 **Name** **Title**  **City, State**

**ACTIVE MEMBERS** shall consist of duly appointed or elected Chiefs of Police, Superintendents, Marshals, or Executive Heads of local, county, regional, or state law enforcement agencies within New Hampshire having full law enforcement powers.

**PROFESSIONAL ASSOCIATE MEMBERS** shall consist of any person not eligible for Active Membership but qualified by training, experience, or position as a Command Officer in a local, state, county, regional or federal law enforcement agency and who may be elected to membership by a majority vote of the Executive Committee. Professional Associate members are not be eligible to hold office or vote.

**BUSINESS MEMBERS** shall consist of commercial enterprises that provided products and services specifically to the law enforcement community or generally to the criminal justice system. Business Members are not eligible to hold office or vote.

As part of my application for membership in the New Hampshire Association of Chief of Police, I affirm that I am not now, nor have I ever been, a member or supporter of any organization that advocates for the overthrow of the United States of America and/or State of New Hampshire government by force, violence or other illegal, unconstitutional methods. I hereby affirm that I will uphold and defend the Constitution of the United States of America.

Subscribed by me this  day of  20 

Signature of Applicant: 