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APPLICATION FOR MEMBERSHIP

Application Date	
First Name	
Last Name	
Address	
City	
State	
Zip Code	
Work Phone	
Cell Phone	
Other phone number	
NCGIA Region	
Email address <small>Required to receive correspondence</small>	
Agency/ Department	

NOTE: Regular Membership applicants **MUST** submit a photocopy of their agency I.D. along with membership applicant form. **This applies for both New and Renewal memberships.**

If you are a conference attendee a copy of your agency I.D. is NOT required.

Sponsor/ Supervisor's Name: _____

RETURN COMPLETED APPLICATION &:

MAKE CHECKS PAYABLE TO:

**North Carolina Gang Investigators Association
P.O. Box 87441
Fayetteville, NC 28304-7441**

Questions contact:

Capt. Mark Bridgeman – Fayetteville Police Dept.
President -NCGIA
(910) 391-2638 cell w/ voice mail
e-mail: president@ncgangcops.org

Annual membership dues are **\$20.00** per year, payable at time of application. The application along with the annual dues of \$20.00 must be sent to the address listed to the left. Changes of address and other membership inquiries should also be directed to the Secretary/ Treasurer at the address or telephone number listed to the left.

Memberships are good from January 1st through December 31st of each year. Memberships received ***after*** October 20th will expire on December 31st of the following year. It is presumed that members acknowledge and agree to abide to the constitution and by-laws of the NC Gang Investigators Association. Please allow 4-6 weeks for your application to be processed, at which time, you will receive NCGIA membership e-mail and other related e-mails.

Date Application Received: _____

Amount: _____ **Approved: Yes** **No**

Date entered into Database: _____

Conference Attendee: Yes **No**