

# CMOA MEMBERSHIP APPLICATION

YEAR: 2018

Mail to: CMOA, 1201 Blacksmith Dr. Gilroy, CA 95020

[www.californiamounted.net](http://www.californiamounted.net)



Annual Membership dues cover the period of Jan. 1, 2018 – Dec 31, 2018  
If 2018 dues are not received by 3/31/18, prior membership will be terminated in 30 days.  
Form must be completed in its entirety.

All applications for admission for membership are subject to approval by the Board of Directors.

Name: \_\_\_\_\_  
                                    First                                    Middle                                    Last

Title/Rank: \_\_\_\_\_

Name of Agency: \_\_\_\_\_

Address of Agency: \_\_\_\_\_  
  Street  City  State  ZIP

Home Mailing Address: \_\_\_\_\_  
  Street  City  State  ZIP

Agency Phone: \_\_\_\_\_

Contact Phone: (Best number at which to reach you): \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Full Time Peace Officer: \_\_\_\_\_ Reserve: \_\_\_\_\_ Volunteer: \_\_\_\_\_ Retired: \_\_\_\_\_

Have you been a member prior to 2016? \_\_\_\_\_

**\*NEW APPLICANTS ONLY:** YOU MUST FURNISH THE FOLLOWING DOCUMENTS:

**Photocopy of Department Identification Card and Verification/Affiliation of Employment on Agency Letterhead**

Membership Dues ( \$35 prior to March 31, \$50 after March 1, 2018)– Please make Checks or Money Orders Payable to:  
**California Mounted Officers Association**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
(Required)

**POINT OF CONTACT: Denise Jungling, CMOA Administrative Assistant, (408) 482-7759**

### Requirements for Membership

Any full-time Law Enforcement Officer to include Level I and Level II Reserve Law Enforcement Officers, **active or retired**, with an interest in Mounted Law Enforcement. Any individual affiliated with a Law Enforcement Agency Mounted Unit and performing one of the following functions: (a) Reserve Law Enforcement Officer; (b) Volunteer Mounted Group; (c) Sheriff and Police Poses; (d) Paid or Volunteer Civilians associated with a Mounted Unit. All applications for membership must be submitted with the website or in writing and are subject to approval by the Board of Directors.

CMOA Use Only Check No: _____ Date Rec'd _____ Membership #: _____ Card Sent: _____
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