



Law Enforcement Membership Sign up

Member information, please provide the following in print:

Full Name: _____

Mailing Address: _____

City, State, Zip Code: _____

Country: _____

Phone Number: _____

Email Address: _____

Law Enforcement Background

Please select from the following:

Certified Police Officer Corrections Prosecutor Judicial Federal Agent Military Police

I am Current Former Retired

I am interested in becoming an official speaker I am interested in volunteering my time

As a member of the law enforcement community your membership is free! Donations are always greatly appreciated.

If donating by check, please make your check payable to Law Enforcement Action Partnership and mail to:

Law Enforcement Action Partnership
121 Mystic Avenue
Suite 9
Medford, MA 02155

Donating by credit card, please provide the following information:

Please circle one: Visa MasterCard American Express Discover

Credit Card Number: _____ Exp. Date: _____

CVC Number (3 digit security code): _____

Name on card: _____

Billing Address: _____