



Application for Membership in The Maryland State Police Alumni Association, Inc.

Date: _____ The membership category I am applying for is (circle the one that applies to you)
Retired - Sworn - Widow - Associate and I hereby make application for membership in the MSPAA. Inc.
See page 2 of this application for classes / definition of membership.

I joined the Maryland State Police in _____ and (select applicable) left their
employment in _____ or retired on _____ and that I left the Department
in good standing, through resignation or retirement, and disciplinary charges were not pending against me.
NOTE: The paragraph above does not apply to Widow and Associate Memberships.

I presently reside at: Street: _____ City: _____

State: _____ Zip: _____ Home phone No.: (____) _____ E-Mail: _____

Employer: _____ Business phone No.: (____) _____

I agree to conform to the By-Laws of the Association, to support its goals and objectives and to conduct
myself in such a manner that it will reflect credit to the Association and uphold the high standards of our
parent organization.

Signature _____ (Sign name in full)

Print Name _____ (Print name in full)

Note: Application must be signed by a member of the MSPAA, Inc. in good standing.

I am personally acquainted with the above applicant and I believe the statements contained herein to
be true.

Signature of sponsoring member: _____ (Sign name in full)

_____ (Print name in full) Membership No. _____

NOTE: Only retired or former Troopers who are REGULAR Members of the MSPAA may
sponsor new members.

Upon approval a membership card will be issued. If disapproved, applicant will be notified.
Annual Dues: \$25.00 (January 1 through December 31 or any part thereof)

Complete this form and make your \$35.00 check out to the MSPAA, Inc. and mail it to:
MSPAA. % John Turrall, 18710 Falls Road, Hampstead, MD 21074.