



Canadian Military Police Association



APPLICATION FOR LIFETIME MEMBERSHIP

[Mark x where appropriate on form]

I wish to join the CMPA for the first time and become a Lifetime member.

I wish to pay my delinquent dues and become a Lifetime member

I wish to update my CMPA contact information

To pay for your Lifetime membership or delinquent dues with either PayPal or a credit card, go to <http://www.mpkitshop.ca>

Rank	Surname	Initials	First names
Service Number	Awards/Decorations		Badge Number (if issued)
<input type="checkbox"/> Regular component Military Police Branch	<input type="checkbox"/> Reserve component Military Police Branch	<input type="checkbox"/> Land	<input type="checkbox"/> Sea <input type="checkbox"/> Air <input type="checkbox"/> Other (Explain)
<input type="checkbox"/> Currently Serving	<input type="checkbox"/> Retired -receiving a pension	<input type="checkbox"/> Released and not receiving a pension	
Address	City	Province/State	
Country	Postal /ZIP Code		
Home telephone ()	Cell ()		
Business telephone ()	E-mail		
Language preference English <input type="checkbox"/> French <input type="checkbox"/>			
<input type="checkbox"/> <i>I would like to volunteer for a position on the CMPA Executive or help out with association events and activities</i>			

Please save the form and forward it as an attachment to the CMPA Membership Director at cmpamembership@gmail.com