



# Peoria Police Citizens Academy Alumni (PPCAA)

8351 W Cinnabar Ave

Peoria, AZ 85345

[www.ppcaa-az.org](http://www.ppcaa-az.org)

## Membership Application

Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Apt/Unit: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Mobile: (\_\_\_\_) \_\_\_\_\_ Other: (\_\_\_\_) \_\_\_\_\_

Preferred name (if different than above) \_\_\_\_\_  
(This is how your name will appear in the PPCAA membership directory and on other material as needed)

Please include your birthday month and day only (MM/DD) \_\_\_\_\_

You are eligible to be an active member of the PPCAA if you are one of the following:

**Please check the one option that applies:**

- |  |                                 |
|--|---------------------------------|
| <input type="checkbox"/> Graduate of Peoria Police Citizens' Academy → | PPCA Graduating Year _____      |
| <input type="checkbox"/> Graduate of SALT Conference →                 | SALT Graduating Year _____      |
| <input type="checkbox"/> Explorer (18+ years old) →                    | Explorers Graduating Year _____ |
| <input type="checkbox"/> Retired Law Enforcement Officer →             | Former Agency _____             |
| <input type="checkbox"/> Spouse of a current PPCAA Member →            | Spouse's Name _____             |

Mail this completed form to the address above or hand deliver at a meeting.

If you are accepted as an active member of the PPCAA the annual dues are \$25.00. Our calendar year runs from February 1<sup>st</sup> through January 31<sup>st</sup>. Thank you for your interest in the PPCAA.

I hereby release and hold harmless the PPCAA and its members from any and all responsibility regarding my activity and/or participation in any PPCAA sponsored event. I will follow all PPCAA governing documents.

**Applicant signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Amount Enclosed:** Annual Dues \$ \_\_\_\_\_ + Optional donation \$ \_\_\_\_\_ = Total \$ \_\_\_\_\_

(To be completed by PPCAA Treasurer)

FOR PPCAA USE ONLY

Date Received: \_\_\_\_\_ Eligibility verified: \_\_\_\_\_  
Amount Received: \_\_\_\_\_ Received by: \_\_\_\_\_