



## Kentucky Association of Chiefs of Police (KACP) 2010 Membership Application

The 2010 KACP Membership is valid from January 1, 2010 through December 31, 2010.

To complete the KACP 2010 Membership Application:

1. Select your KACP membership type
2. Complete your name and address information
3. Mail your completed application and fee to the following address.  
**KACP Membership, P.O. Box 176473, Fort Mitchell, KY 41017**

If you have a Life Membership, you can fax the completed application to 859/781-6994.

### Membership Classifications & Requirements

Please check one of the following KACP memberships.

- Active Membership - \$95.00 dues**
  - The full-time chief law enforcement executive and seconds in command of any law enforcement agency in Kentucky.
  - The Sheriff and Chief Deputies of any Sheriff's Department in Kentucky.
  - The agent in charge or assistant agent in charge of any federal law enforcement agency in Kentucky.
  - The chief law enforcement executive of major railroads operating in Kentucky.
  - Kentucky State Police Post Commanders
- Law Enforcement Administrative Membership - \$95.00 dues \***
  - Full-time sworn law enforcement officers assigned to an administrative or supervisory position other than the Chief executive or seconds in command.
  - Full time personnel assigned to a law enforcement institution/training facility in administrative/supervisory capacity.
- Life Membership – Dues free**
  - Active KACP member with ten (10) years continuous service or Past President prior to retiring or Life Members appointed prior to August 1, 2005 and in good standing with the Association at the time of their retirement.
- Retired Membership - \$25.00 dues \***
  - Active or Administrative member retired from law enforcement who is not eligible for Life Membership and in good standing with the Association. Retired active members may apply for Life Member status after ten (10) years continuous membership in the Association.
- Associate Membership - \$25.00 dues \***
  - Any citizen who supports the mission of law enforcement.

\* All Law Enforcement Administrative, Retired, and Associate members have all KACP Association privileges *except* for the right to hold elective office and the right to vote.

### Name and Address Information

Please complete the following name and address information.

|                     |                   |                       |                           |
|---------------------|-------------------|-----------------------|---------------------------|
| <b>Rank/Title:</b>  | <b>Last Name:</b> | <b>First Name:</b>    | <b>Middle Initial</b>     |
| <b>Agency Name:</b> |                   | <b>County:</b>        |                           |
| <b>Address:</b>     |                   | <b>City:</b>          | <b>State:</b> <b>Zip:</b> |
| <b>Office #:</b>    | <b>Cell#:</b>     | <b>Email Address:</b> |                           |
| <b>Fax#:</b>        | <b>Home#:</b>     |                       |                           |