



International Latino Gang Investigators Association

MEMBERSHIP APPLICATION



www.ILGIA.org

Mail Membership Application and payment

\$25.00: 1 Year Membership / **\$60.00:** 3 Year Membership

CHECK or MONEY ORDER to:

I.L.G.I.A.

P.O. Box 1148

Gig Harbor, Washington 98335

PERSONAL INFORMATION

Name _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

E-mail _____ Alternate E-mail _____

(A valid and unblocked Email address must be provided for access to the Member's Only web site and Message Board Forum)

Mothers Maiden Last Name: _____

(This information is used for a security log in question for the member's only website.)

EMPLOYMENT INFORMATION

Agency _____ Rank / Title _____

Supervisor's Name _____ Sup. Phone _____

Employer/Address _____ Retired? _____

Work Phone _____ Sworn / Civilian Staff _____

Cell Phone _____ Secondary Contact # _____

Please check one: New ILGIA Member _____ or ILGIA Renewal _____

By my signature to this application, I agree to support and promote the objectives of I.L.G.I.A. I also understand that my membership may be suspended by the I.L.G.I.A. Board if I am found to have violated the rules and by-laws of the I.L.G.I.A. Retired and Honorary Memberships will have to be approved by the I.L.G.I.A. Board and are advised to attach their resume to membership application.

Signature _____ Date ____/____/____

New Members must include a photo copy of your Law Enforcement Identification.

Note: this information is confidential and will used only by and for the ILGIA for Security/Verification Purposes

Received: _____ Notified: _____ Mailed: _____

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