

**MEMBERSHIP APPLICATION
INFORMATION FORM**

NYPD BROWARD 10-13 CLUB INC.

6009 NW 10th STREET

Margate, FL 33063

Telephone (954) 977-3880

Fax (954) 977-6812

Date: _____

Name: _____

Address:

City/State/Zip:

Home Phone: _____ Cell# _____

E-Mail Address:

D/O/B: _____

Spouse's Name:

Date of Appointment:

Date of Retirement:

Type of Retirement: Service Ordinary Medical Disability Vested

Previous Commands:

Sponsored By:

NEW MEMBERS SUPPLY A COPY OF ONE OF THE FOLLOWING:

1. Retirement Card
2. Pension Card
3. Quarterly statement from the pension bureau

Dues: Be sure to include a \$45.00 Check, Payable to the NYPD BROWARD 10-13 CLUB INC. (That includes your annual dues of \$40.00 plus \$5.00 initiation/reinstatement fee).