



Fraternal Order of Police Mesa Associate Lodge

Business Application

\$60.00 Annual Membership

Business Name: _____

Owner Name(s): _____

Business Address: _____

Phone Number: _____

Email Address: _____

Preferred method of communication: _____

Communication will be for membership renewal and events

Make checks payable to: Mesa Lodge 9 FOPA

Please send completed form and check to:

By mail to FOPA Mesa Lodge 9, PO BOX 999, Mesa, Az 85211-0999

www.lodge9.azfop.com

Twitter: @mesalodge9