

Texas System Police Association Application

State Office: (972) 268-4827 or (903)-724-4447 · E Mail: texassystempoliceassociation@gmail.com

Web site: www.tspa.name

Mail Application To: TSPA, P.O. Box 195381, Dallas, TX 75219

New Member Re-activating previous membership Renewing current membership

Status Change (See new rates below) Address Change

Name: _____ Date: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Date of Birth: _____ Male Female

Agency: _____ County of Employment: _____

Position: _____ Home Phone: _____

Work Phone: _____ Pager: _____

Cell Phone: _____ E Mail Address: _____

I was referred to TSPA by: _____ (Agency): _____

Paying by check: 1 payment of \$77.00, Annual Membership

2 payment of \$42.00, Bi-annual Membership

Or

Paying by credit card: *Choose one:* VISA MASTERCARD

Charged on the 5th of each month **\$7.00**

Charge one payment of **\$77.00** every 12 months automatically
(One month "FREE". A \$7 dollar discount for annual Credit Card payment)

Charge two payments of **\$42.00** every 6 months automatically

Debit or Credit

Name of cardholder: _____ Signature: _____

Card Number: _____ Expiration Date: _____

Beneficiary of \$1,000.00 TSPA member line of duty death benefit, effective after one year of membership.

Beneficiary Name: _____

Member Signature: _____ Date: _____