



HONOR LEGION POLICE DEPARTMENTS STATE OF NEW JERSEY®

1 East Ridgewood Avenue
Paramus, NJ 07652
www.njhl.com
"Finest of the Finest"

NJHL Application for Membership Active New Jersey Law Enforcement Officer

FOR OFFICIAL USE ONLY: Honor Legion Member #

Last Name	<input type="text"/>	Last Name of Beneficiary	<input type="text"/>
First Name	<input type="text"/>	First Name	<input type="text"/>
Middle Name	<input type="text"/>	Middle Name	<input type="text"/>
Suffix	<input type="text"/>	Suffix	<input type="text"/>
Street Address	<input type="text"/>	Street Address	<input type="text"/>
Municipality	<input type="text"/>	Municipality	<input type="text"/>
State	<input type="text"/>	State	<input type="text"/>
Zip	<input type="text"/>	Zip	<input type="text"/>
Phone Number	<input type="text"/>	Phone Number	<input type="text"/>
Date of Birth	<input type="text"/>	Relationship	<input type="text"/>
Email:	<input type="text"/>		

Agency / Department	Municipal Code	Date of Appointment	Official Investigation Report #
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I the undersigned, an active law enforcement officer, who is presently employed by a law enforcement agency/department as defined in the by-laws of the Honor Legion Police Departments State of New Jersey. I have performed a deed of valor, at imminent risk of life to myself/others, i.e. armed adversary within kill zone, fire/water rescue with affirmation by an official Investigation report (IR) sent with membership application.

In making this application to become member of the Honor Legion Police Departments State of New Jersey, I consent to the investigation of my application in order to determine my eligibility of whatever else may be required by the investigation board.

I certify that all answers are true.

Applicant Signature _____ Dated _____ \$50.00 Check / Money Order # _____

<u>Official Use Only</u>		
Endorsement Signature _____	Investigation Signature _____	Vote for Membership On This Date _____
Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Tabled <input type="checkbox"/>		
Comments _____		

Please remit dues and initiation fee of \$50.00 check or money order only, payable to:
Honor Legion Police Departments State of New Jersey
Along with this application and the Official Investigation Report (I.R.) and mail to:
Second Vice President
P.O. Box 186
Paramus, NJ 07653