



# 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 Retired Law Enforcement Officer

FOR OFFICIAL USE ONLY: Honor Legion Member #

Last Name

First Name

Middle Name

Suffix

Street Address

Municipality

State

Zip

Phone Number


Date of Birth

Email:

Agency / Department

Municipal Code

Date of Appointment

Official Investigation Report #

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 #

**Official Use Only**

Endorsement Signature

Investigation Signature

Vote for Membership On This Date

Approved  Rejected  Tabled

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