



Membership Application

NEW MEMBER

RENEWAL

CHAPTER ONLY OR OTHER

Date _____

Name _____

Title or Rank _____

Agency _____

Address _____

City, State, Zip _____

Country _____

Phone _____ Cell _____ Fax _____

E-Mail Address _____

All membership fees in U.S. dollars

IALEP membership	check one: <input type="checkbox"/> Active <input type="checkbox"/> Associate	\$85	
Chapter Membership (optional):			
North Carolina (NCLEPA)		\$45	
Ontario Association of Law Enforcement Planners (OALEP) [Pay dues to Chapter separately]			
Southwest - Arizona, Colorado, So. Nevada, So. Utah, New Mexico		\$20	
Virginia (VALEP)		\$0	
Maryland (MAPP)		\$0	
TOTAL			

Mail completed application along with a check, money order or Credit Card Authorization form (\$5 processing fee for credit card payments) to:

IALEP
P.O. Box 11437
Torrance, CA 90510-1437

IALEP is a 501(c) (6) nonprofit corporation. Federal Tax ID # 43-1569519



Credit Card Authorization Form

Member Name:	
Agency:	
Fees Charged:	
Credit Card Fee:	
Credit Card Total:	
Name on Card:	
Credit Card Number:	
Expiration Date:	
Credit Card Code:	
Billing Address Street:	
Billing Address City:	
Billing Address State/Province:	
Billing Address Postal Code:	
Billing Address Country:	

Use this form to pay for your IALEP Membership fees using a Visa, MasterCard, American Express, Discover, or Diners Club card.

If paying by Credit Card this form may be filled out and scanned, or downloaded from our website and filled out electronically, and emailed to office@ialep.org. Credit card fee is \$5 for transactions less than \$500 and \$10 for amounts \$500 and over.

This form will be destroyed upon completion of the transaction. No information on this form will be retained.