



# CITIZEN POLICE ACADEMY ALUMNI ASSOCIATION OF NORTH TEXAS

## MEMBERSHIP APPLICATION

Check One:  CPAAA  Individual

**Please Print**

First Name	M.I.	Last Name
Is This Membership: <input type="checkbox"/> New <input type="checkbox"/> Renewal		

### CITIZEN POLICE ACADEMY ALUMNI ASSOCIATION INFORMATION:

Association Name: _____		
Address: _____		
City, State, Zip: _____		
E-Mail Address: _____	Web Address: _____	
CPAAA President: _____	Telephone Number: _____	
CPAAA Rep: _____	E-Mail Address: _____	Telephone Number: _____
<b>CPAAA Meeting Information:</b>		
Date(s): _____		
Time(s): _____		
Location: _____		

### INDIVIDUAL MEMBER PERSONAL INFORMATION:

Home Address: _____		
City, State, Zip _____		
Telephone Number: _____	E-Mail Address: _____	
CPA Graduated from: _____		
CPA Liaison: _____	E-Mail Address: _____	Telephone Number: _____

PLEASE INCLUDE MY INFORMATION IN AN ANNUAL MEMBERS' DIRECTORY	<input type="checkbox"/> YES	<input type="checkbox"/> NO
---	------------------------------	-----------------------------

**ANNUAL MEMBERSHIP DUES:** CPAAA - \$25.00; Individual - \$10.00

Please make check payable to CPAANT. Registration form and annual membership dues may be mailed to:

**CPAANT**  
**P.O. Box 489 Eules, Tx 76039**

*Thank you for your Support!!*