



Pulaski Association
New York City Police Department
Membership Renewal Application for 2010

If you wish to retain your membership with the Pulaski Association and continue to receive the benefits available to you and your family, please complete this renewal form and mail it to the address listed below with the appropriate dues. Please make check payable to the "Pulaski Association, N.Y.P.D." Failure to keep dues up to date will suspend your benefits such as Children's Scholarship and death benefits.

Please complete and mail to:
Stefan Komar
P.O.Box 447
Floral Park, NY 11002

**** Dues: \$20.00 (Lifetime Members - \$ 10.00)****

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DOB ___/___/___ HOME PHONE # _____ WORK PHONE # _____

E-MAIL _____

ex: Screen Name @ server . com

RANK _____ TAX # _____ COMMAND _____ APPOINTMENT DATE ___/___/___

(PLEASE CIRCLE ONE) LIFETIME MEMBER, RETIRED, ACTIVE, OVER 65

*****Information below to be filled out by **NEW APPLICANTS ONLY*******

List Polish / Slavic ancestral background of member of spouse / family

List Children's Names and DOB

Father's Last Name _____ Mother's Last Name _____

Spouse's Maiden Name _____ Name of Beneficiary _____

New applicants with five years of service will not be eligible for benefits until the penalty has elapsed. One penalty will be added to the five for each year a member has in the department (6 in 6 year penalty). The marriage exception applies to those marrying into the family of Polish/Slavic extraction.

I hereby agree to abide by the Constitution and By Laws and any future amendments and changes thereto:

Signature _____ Date _____

FOR OFFICE USE ONLY:

Delegate / Proposer _____	Command _____
Action of Membership Committee _____	Date _____
Eligibles: POLES, UKRAINIANS, RUSSIANS, BELORUSSIANS, CZECHS, SLOVAKS, CROATS, SERBS, BOSNIANS, MONTENGRINS, BULGARIANS, HUNGARIANS, LITHUANIANS, LATVIANS, ESTONIANS	