**Payment Date: Cash PayPal Check Check #:**

# \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*PLEASE SEND FORM WITH PAYMENT\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* I

## C:\Users\lcsok9handler\Desktop\ipca logo.jpg

## **IDAHO POLICE CANINE ASSOCIATION**

## **PO BOX 190104**

## **Boise, Id 83719-0104**

APPLICATION FOR MEMBERSHIP

(rev.02/18)

**Requirements: Regular membership** to this Association shall be open to any active, full-time commissioned law enforcement officer, either state, county, municipal or correction officers or federal law enforcement personnel who have a canine assignment in the state of Idaho, who have met the requirement of the Idaho Post Academy.

### Membership Type: Regular

**Associate**

**For Year**

**Membership:$50.00 January 1st to December 31st each year**

**$150.00- for three or more k9 teams, All K9 registrations must be sent together.**

**Associate Membership- $20.00**

**FORM MUST BE COMPLETED TO BE VALID.**

Last Name: \_ First: MI: Agency: Agency Address: County: City: State: Province: Country: Zip: A-Phone: Cell: E-Mail Address:

Handler:

Trainer: \_

Quarry:

Supervisor:

Dog's Name: Breed:

Patrol:

Narcotic:

Explosive:

Other:

I affirm that all information provided on this Document is true and accurate.

### Signature: Date:

**Associate Membership (out of state or military K-9 officers, non K-9 Idaho commissioned officers):** The agency you work for must supply the IPCA with a letter verifying that you are a full-time commissioned officer and that you are assigned to work with canine. The letter must be signed by the agency head and accompany this application.