

# MN Association of Law Enforcement Firearms Instructors

## Membership Application

Name: \_\_\_\_\_ Rank/Title: \_\_\_\_\_

Agency: \_\_\_\_\_

Agency Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

For mailing purposes I prefer that the association uses my ( ) Home or ( ) Agency address

Agency Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_

POST License Number: \_\_\_\_\_ Full Time ( ) Part Time ( )

All MALEFI applications must include the following:

1. A signed and dated application form
2. Signature of an endorsing MALEFI member
3. Membership dues of \$20 (Make check payable to MALEFI Treasurer)
4. Copy of a certificate of attendance/completion of a course qualifying you as an instructor in law enforcement firearms or a related field.

If you have any questions concerning membership qualifications or applicant endorsement, or are inquiring about the association, please contact the Board Member in your region.

Member Status Applied for: \_\_\_\_\_ Provisional \_\_\_\_\_ Associate \_\_\_\_\_ Regular \_\_\_\_\_ Emeritus

Signature: \_\_\_\_\_

Endorsing MALEFI Member: \_\_\_\_\_

Signature: \_\_\_\_\_

Agency of Endorsing Member: \_\_\_\_\_

Return this application and payment (\$20.00) to:

Pat Murphy, Carver County Sheriff's Office, 606 East 4<sup>th</sup> St., Chaska, MN 55318-2102