



2012

FOP LEGAL DEFENSE PLAN APPLICATION

The Nevada State Lodge is the local group plan coordinator for the Legal Defense Plan for members of the Fraternal Order of Police in the State of Nevada. All members of the Order in Nevada will be covered under the "Group Plan". **The current rate under the Group Plan that includes off duty coverage is \$240.00 for calendar year 2012.** Membership is effective from 1 January through 31 December of each year. Membership is available pro-rated throughout the year. Call the telephone number listed below for further information.

Membership in the Plan is extended only to eligible, paid-up members in good standing of the Fraternal Order of Police. Your check must arrive by the 20th of the month, and your membership will begin on the 1st day of the following month. Please DO NOT send cash.

Legal Defense renewal invoices will be sent out in October/November of each year to allow ample renewal time.

To avoid confusion, those submitting both an FOP membership application **AND** an application for the Legal Defense Plan, are asked to please submit **TWO** separate checks with their applications, one for the lodge dues and one for the legal plan.

For enrollment in the Legal Defense Plan, mail this application and your check payable to:

NEVADA STATE LODGE, FRATERNAL ORDER of POLICE.

P.O. Box 620832

Las Vegas, NV 89162-0832

For further Information call: 702-877-6635 (May be a recorded message).

Check One: New Enrollment Legal Plan Annual Renewal with Off Duty Coverage

Name _____ Address _____

City _____ State _____ ZIP _____ Telephone _____

***Date of Birth:** _____ ***Social Security #** _____

***Employer** _____

(Note: * required fields-application cannot be processed without this information)

Email Address: _____

Local Lodge Name and Number _____

Legal Plan Agreement

By enrolling in the Legal Defense Plan, I agree to maintain a current membership in the Fraternal Order of Police. I understand if I fail to do so, my enrollment in the Legal Defense Plan will be terminated upon expiration of my membership in the Fraternal Order of Police.

Signature _____ Date _____

FOR STATE LODGE USE ONLY

Lodge (Group) Name: Nevada State Lodge

Date Rec'd _____ By _____

CK/MO # _____ Amount \$ _____

Remarks _____



FOP LEGAL DEFENSE PLAN CY 2012

Monthly Pro-Rated Enrollment

Legal Defense Plan Annual Fee Schedule

2012 Effective Date	Balance for the Year
1 January	240.00
1 February	220.00
1 March	200.00
1 April	180.00
1 May	160.00
1 June	140.00
1 July	120.00
1 August	100.00
1 September	80.00
1 October	60.00 + renewal
1 November	40.00 + renewal
1 December	20.00 + renewal

Note¹: *Regardless of your effective date in the plan, your renewal notice will go out to plan members in October/November of the enrollment year.*

Note²: For new members joining in the last month of 2011, the pro-rated amount is as follows:

1 December – \$18.42 + renewal \$240 for a total of \$258.42