

THE GREATER PHILADELPHIA LOCKSMITHS ASSOCIATION

MEMBERSHIP APPLICATION

I am applying for: Active member: Associate member: Apprentice member:

Name: _____ Date of birth: _____

Home address: _____ Social Sec. # : _____

City/State/Zip: _____ Email Address: _____

Status: Married: Single: Spouse name: _____ Home phone: _____

Business name: _____ Bus.phone: _____

Business address: _____ Bus.fax: _____

City/State/Zip: _____

How long have you been engaged in locksmithing? Part time: _____ Yrs: Full time: _____ Yrs:

Are you a sole owner: Partner: Corp. officer: Employee: Student:

Place of last employment: _____ Name of supervisor: _____

Address: _____ Phone: _____

ALOA member: Yes: No: Number: _____ Status: RL CPL CML

Other organizations: _____

Have you ever been convicted of a felony: Yes: No: If yes explain: _____

Sponsor's name: _____ Sponsor's signature: _____

I certify that all statements are true and I hereby authorize the Greater Philadelphia Locksmith Association to perform a background investigation. All information will remain confidential. GPLA reserves the right to refuse any application to maintain the highest standard of security.

Applicant signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE.

Date received: _____ Initiation fee: \$ 95.00 Cash: Check: Visa:

Sponsor check: _____ Certificates: _____ Visa/MC # _____

Date board action: _____ Accepted: Rejected:

Date membership action: _____ Accepted: Rejected:

Remarks: _____

