



Tactical Officers Association

- (\$25.00) Category I – Individual Membership
- (\$200.00) Category II – Team Membership (10 members)
Additional members \$20.00 each

Name _____ Rank/Title _____

Agency _____ Assignment _____

Agency Address _____
Street City State Zip Code

Mailing Address _____
(if different) Street City State Zip Code

Agency Phone _____ Agency Fax _____

Personal Phone _____ Date of Birth _____

Agency Email _____ Personal Email _____

Basic Law Enforcement Training (date and location) _____

Name of Supervisor to verify Assignment _____

Supervisor's Telephone Number _____

Areas of Specialty/Instruction (firearms, Simunition, rappelling, breaching, etc.) _____

I, _____ affirm the above listed information is true and accurate. Further, I authorize the North Carolina Tactical Officers Association to contact my agency to verify the above information.

Signature _____ Date _____

WWW.NCSWAT.ORG

Mail Completed Application and Check to:
476 Shotwell Road Suite 102
PO Box 207
Clayton, N.C. 27520