

## Membership Options

- ☐ Sworn New General Membership • \$100 (Paid in Full)
- ☐ Sworn Membership Renewal • \$100 (Paid in Full)
- ☐ Sworn Boston Police Membership Payroll Deduction (\$2 weekly; automatic renewal)
- ☐ Sworn Retiree Membership • \$25
- ☐ Associate Membership • \$25

Name:

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Agency:

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Address:

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Rank:

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DOB:

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Badge Number:

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Phone:

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ID Number:

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Personal Email:

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Are you interested in travel\*\*?

☐ Yes

☐ NO

Interested in volunteering at events?

☐ Yes

☐ NO

Interested in receiving text alerts for upcoming events?

☐ Yes

☐ NO

**\*\*Travel is not required.**

## Our Mission

"Our mission is to send Boston-area police officers to attend the funeral services of law enforcement officers murdered in the line of duty. We provide emotional support to the fallen officer's family, colleagues, and community. We also present the family with a monetary donation to help with immediate expenses during their time of need."

**Pay by Check  
or Venmo us**

Brotherhood for the Fallen, Inc.  
PO Box 51547  
Boston, MA 02205  
617-297-6622

*Scan  
to pay*

@BFTFBoston17



## Payroll Deduction Form

Date: \_\_\_\_\_ Employee ID: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Department Name: **Boston Police Department**

I hereby authorize the City of Boston to deduct from my wages the amount of \$2.00 per week, every pay period, for Sworn Officer Membership dues to the Brotherhood for the Fallen – Boston Chapter. This authorization will remain in effect for a minimum period of one calendar year.

Signature: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

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

