## Membership Request

This form is used to request membership to the North Carolina Association for Property and Evidence. We do offer memberships to persons from <u>other states</u>, please read below. To be eligible to join you meet one of these requirements:

**ACTIVE** - This membership is open to those dues-paying individuals involved in the processing/retention of property or evidence <u>WITHIN the state of North Carolina</u> on an individual basis. The member must be involved with the handling or processing of property and evidence. Active membership is also open to persons formerly involved in, and subsequently retired from, a position involved with the handling or processing of property and evidence in some part of the North Carolina justice system. This is a <u>voting</u> member and dues are \$35.00 per year.

**ASSOCIATE** - This membership may be granted to any dues-paying person or interested party who wishes to attend Association meetings but does not meet the criteria of

active membership. This membership is also open to individuals who are <u>OUTSIDE the state</u> <u>of North Carolina</u>. Associate members do not have the right to vote on Association business. Associate members are encouraged to participate by presenting information to the

voting members and the Executive Board. This is a <u>non-voting</u> member, and the dues are \$35.00 per year.

**CORPORATE** - This membership may be granted to agencies or corporations who wish to support and attend Association meetings but does not meet the criteria of active

or associate membership. Corporate members do not have the right to vote on Association business. Corporate members are encouraged to present information to the voting members and Executive Board. This is a <u>non-voting</u> membership and dues are \$100.00 per year.

All requests will be reviewed by the Executive Director and/or the Executive Board for approval. If you have any questions, please contact Executive Director at exdir@ncape.net and we look forward to having you join us.

* Inc	* Indicates required question				
1.	Name *				
	Trains				
2.	Name of Agency *				

3.	Job Title *	_
4.	Agency's Main Telephone Number *	
5.	Your Direct Telephone Number *	
6.	Your Cellphone Number (OPTIONAL)	
7.	Your Work Email *	
8.	Your Agency's Address *	
9.	Are you a sworn or non-sworn? *	
	Mark only one oval.	
	Sworn Law Enforcement Officer	
	Non-Sworn Civilian Employee	

10.	What Evidence Tracking Software or Records Keeping Software do you use, be specific as to its name (RMS is not specific). If it is Microsoft Excel, Handwritten Forms, or NONE please tell us.		
11.	Based on the descriptions above I believe I am eligible to become a member of NCAPE	*	
	Mark only one oval.		
	Active Member		
	Associate Member		
	Corporate Member		
	I am unsure if I qualify please contact me		
12.	Comments		

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