

Membership Application

Please complete a separate form for each applicant.

Check if applying for Full Membership Associate Membership
 Affiliate Membership Supporting Membership Emeritus Membership

Name: Title:
Last, First, Middle Initial

Department: Institution:

Address:

Phone: Fax:

Email address:

WACLEA Annual Membership Dues – July 1 – June 30

Full Membership	\$100.00
Associate Membership	\$80.00
Affiliate Membership	\$60.00
Emeritus Membership	\$20.00
Supporting Membership	\$400.00

TOTAL \$

Make check payable to: WACLEA

Mail to:

WACLEA
c/o LCSC Security
500 8th Avenue
Lewiston, Idaho 83501

**** Membership Categories Defined**

Full Membership:

An individual who coordinates or administers the law enforcement or security programs for a university or college system is eligible for full membership. This individual shall be the institutional representative to WACLEA.

Associate Membership:

An employee of a member institution with interest or concerns directly related to life and property or safety issues on campus upon certification by a full member of the Association shall be eligible for Associate Membership.

Affiliate Membership:

Institutions of Higher Education which do not provide for their own security programs, and those that do not qualify under full membership, such as teaching hospitals that do not have their own in-house security administrative organization, and senior members of external law enforcement agencies including municipal, state, county, regional, and federal agencies shall be eligible for affiliate memberships.

Emeritus Membership:

A person who, upon retirement, is a member of WACLEA in good standing shall be eligible for Emeritus Membership.

Supporting Membership:

A person who, by reason of vocation, profession, business or civic interest, shares in the concerns and objectives of the Association and desires to demonstrate such support shall be eligible for Supporting membership.