



NTOA TEAM MEMBERSHIP APPLICATION

Please check off type(s) of membership you are applying for. You may pay for Tactical and CNT memberships to receive both publications.



TEAM Tactical Edge Membership:

- U.S./Canada/Mexico Membership\$150
- Foreign Membership\$200



TEAM Crisis Negotiator Membership:

- U.S./Canada/Mexico Membership\$125

Who is eligible for Individual Membership?

- Full-time sworn law enforcement officers
- Retired law enforcement
- Military (active duty or reserve)
- Non-sworn personnel (tactical EMS, tactical dispatchers, non-sworn crisis negotiators)

What ID must accompany my membership application?

- **Full-time sworn** - Photocopy of law enforcement ID or an agency letterhead statement from applicant's direct supervisor, verifying applicant's law enforcement status.
- **Retired law enforcement** - Proof of former sworn status.
- **Military** - Photocopy of active duty card and letterhead from direct supervisor verifying unit attachment. Military members will be required to submit updated verification with renewal payment each year.
- **Non-sworn personnel** - Current agency letterhead statement from the tactical or negotiations team commander verifying applicant's supportive role within the team. Non-sworn members must submit updated verification with renewal payment each year.

How did you learn about the NTOA? (check all that apply)

- NTOA training class NTOA Conference Other training/event (please list) _____ NTOA Store
- The Tactical Edge Crisis Negotiator Other publications (please list) _____ NTOA Resource Library
- NTOA email NTOA Website Other Websites (please list) _____ Friend Other _____

IMPORTANT: Applications sent without proper documentation and/or incorrect payment amount will be returned.

POINT OF CONTACT INFORMATION:

Point of Contact* Name - First _____ MI _____ Last _____

Rank _____

Home E-mail _____ Personal Agency E-mail _____

***If point of contact changes at any time, please notify NTOA immediately via fax 215-230-7552, with new point of contact.**

AGENCY INFORMATION: Agency Name _____

Agency Address _____ Suite No. _____

City _____ State _____ Zip _____

Agency Phone _____ Agency Fax _____

Population Served by Agency _____ No. of Sworn Officers in Agency _____

TEAM INFORMATION: Team Name _____

Team Status (check one) Full Time Part Time

Multi-jurisdictional? Yes No If yes, list other departments on team: _____

No. of Tactical Members: _____ No. of Negotiators: _____ No. TEMS _____ No. Sworn TEMS _____ No. Bomb Technicians _____

No. of Breachers: _____

Multi Geographic Area Served _____ Multi Jurisdictional population served _____ No. Training Hours _____

PAYMENT INFORMATION:

Signature of Applicant _____

Credit Card: Visa Mastercard American Express Card Number: _____ Exp: _____

(For VISA & MC - last 3 digits in signature line __ __ __) (for AMEX: 4 digits in small print on card front __ __ __ __)

Check Amount \$ _____ Check # or Money Order # _____ Purchase Order # _____

Make check payable to NTOA. Mail application/ID to:

NTOA, PO Box 797, Doylestown, PA 18901

If paying by credit card, fax application and ID to:

Fax: 215.230.7552 Ph: 800-279-9127 www.ntoa.org

Please be sure to provide NTOA with a list of your team members and their email addresses so NTOA can send updates on the latest training, events and store specials.