

# PUBLIC SAFETY EMPLOYEES ASSOCIATION

## SITKA POLICE DEPARTMENT MEMBERSHIP REGISTRATION FORM

NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

DATE OF EMPLOYMENT: \_\_\_\_\_

POSITION: \_\_\_\_\_

DUTY STATION/SHIFT: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HOME PHONE: \_\_\_\_\_

PERSONAL E-MAIL  
ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

PLEASE RETURN TO:

\_\_\_\_\_

**PUBLIC SAFETY EMPLOYEES ASSOCIATION**

**4300 BONIFACE PARKWAY, SUITE 116**

**ANCHORAGE, AK 99504-4387**

**Phone: (907) 337-1979 Fax: (907) 337-1753 Toll Free: (888) 337-1979**

**Web: [www.psea.net](http://www.psea.net) E-Mail: [psea@psea.net](mailto:psea@psea.net)**

*\*\*Please update this information with PSEA whenever there is a change.*