

Please list locksmith associations you are a member of and your membership number:

Have you ever been convicted of a felony? _____ If yes, when: _____
Charge _____ Where _____

TOOL Sponsors (if any)

1. _____

2. _____

Type of Membership -- Please check only one:

Active Membership -- Individuals actively engaged in the locksmith trade currently possessing a valid locksmith business license or working for a licensed locksmith.

Associate Membership -- Individuals involved in the manufacturing of equipment or services to the locksmith or security industry.

Apprentice / Student Membership -- Individuals undergoing training to become a locksmith. Apprenticeship/Student membership is limited to only two years for individuals 16 or over.

Annual dues in the amount of \$40.00 are due with this application. If the application is made after July 1 of the year, the amount due for the current year will be \$20.00. In addition a separate contribution to the Legislative fund of \$15.00 and a non-refundable application fee of \$30.00 are also due with this application. If the application is not approved, only your dues and legislative fund contribution will be refunded to you.

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I certify that all statements in this application are true. If accepted as a member, I agree to abide by the By Laws of TOOL and any other rules or regulations passed by the Board or membership. I also understand that failure to provide truthful information on this application may cause revocation of my membership in TOOL.

I further authorize TOOL representatives to perform a background check and investigate all character references and statements made on this application..

Signature _____ **Date** _____

for office use only: Date received by Secretary _____ Background Check TOOL Board vote. _____
Date Accepted _____ Date Notified _____ Date Dues Paid _____

(Revised 2006 September 25)