



IPA Membership Application

International Police Association

Police Lines Head Quarters, H-11, Islamabad

Email: info@ipa-pk.com Website: www.ipa-pk.com

WhatsApp: +92 333 525 5502

Attach two 1.5' x 1.5' size photographs (in uniform for serving officers)

Name _____ Father's Name _____

Title / Rank _____ ☐ Serving, Service No. _____ ☐ Retired

Place of Posting _____ Email _____

Date of Birth

D	D	-	M	M	-	Y	Y	Y	Y
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 CNIC

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(attach copy of CNIC)

☐ Have you previously been a member of IPA?
If yes, please give Membership No. / year: _____

Permanent Address _____

Present Address _____

Mobile

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 WhatsApp

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Name & Signature of Sponsor _____ His IPA No./ Year _____

I am enclosing herewith Bank receipt No. _____ Dated _____ amounting to Rs. _____ deposited in favour of IPA Pakistan Section, Account No. 1125739 of J.S. Bank, F-7 Markaz, Islamabad. I understand that my ordinary membership will lapse unless renewed by 31st March each year.

* In case of a Foreign Associate Member, postage etc. for airmail delivery of membership card shall be chargeable in addition.

Membership Categories & Fees

- | | | |
|--------------------------|--------------------------------------------|-----------------------|
| <input type="checkbox"/> | Ordinary Membership | Rs.3,000 |
| <input type="checkbox"/> | Annual Renewal Fee | Rs.2,500 |
| <input type="checkbox"/> | Life Membership | Rs.25,000 |
| <input type="checkbox"/> | Membership/Renewal fee for Retired Persons | Rs.2,500/
Rs.2,000 |
| <input type="checkbox"/> | Life Membership for Retired Persons | Rs. 20,000 |
| <input type="checkbox"/> | *Foreign Associate Member | \$20 |

DECLARATION: I hereby declare that the above information is true to the best of my knowledge and belief. I have forwarded a copy of Bank receipt through ☐ WhatsApp: 03335255502 ☐ Email: info@ipa-pk.com. I undertake to abide by the Constitution/Rules of IPA Pakistan in letter and spirit. I will fully endeavour to dedicate my services by fulfilling all the obligations of IPA membership.

Date _____ Signature of Applicant _____

For Official Use Only:

☐ Region _____ Signature of Chairperson _____ No. & Date _____

☐ IPA Card issued, No. & Date _____ Signature of Issuing Authority _____

Ref No. _____ Date _____ ☐ WhatsApp copy of Card sent to Member