

# NATIONAL FUGITIVE RECOVERY AGENCY NATIONAL FUGITIVE RECOVERY INSTITUTE



## MEMBERSHIP APPLICATION

Date: \_\_\_/\_\_\_/\_\_\_

RIGHT THUMB PRINT

Please provide 4 Passport Sized Photos (Head & Shoulders) for Identification purposes. Also, please provide your Right Hand Thumb print in the space indicated on this application. Upon acceptance as a registered member of the National Fugitive Recovery Agency, you will be notified by mail and via email. Please be sure to include all required information, as failure to provide verifiable information will cause this application to be denied and forfeiture of all membership/application fees will occur.

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_  
DOB: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Height: \_\_\_\_\_ ft. \_\_\_\_\_ in. Weight: \_\_\_\_\_ lbs.  
Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Marital Status: \_\_\_\_\_  
Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Postal Zip Code: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_  
Business Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ ext: \_\_\_\_\_ Cellular Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Driver License No: \_\_\_\_\_ State: \_\_\_\_\_ Exp. Date: \_\_\_/\_\_\_/\_\_\_

Please be sure to accurately answer all of the following questions:

1. Are you at least 25 years of age?  YES  NO
2. Have you ever been convicted of a crime?  YES  NO
3. If **Yes**, has the record been expunged or sealed?  YES  NO
4. Are you a United States Citizen?  YES  NO (If not, please provide a copy of your Alien Registration Identification Card)
5. Are you currently a member of the National Fugitive Recovery Agency?  YES  NO
6. If **Yes**, please indicate your current Agent Level:  Bail Enforcement Agent  Fugitive Recovery Field Agent  
 Fugitive Recovery Agent  Fugitive Recovery Special Agent ( Jr. Grade  Sr. Grade)
7. Are you currently enrolled in the National Fugitive Recovery Institute?  YES  NO
8. Are you seeking Certification as a National Fugitive Recovery Agent?  YES  NO

### **Membership:**

I, \_\_\_\_\_, am applying for membership and registration in the National Fugitive Recovery Agency and certify that all information provided herein is true and accurate to the best of my knowledge. I hereby authorize the National Fugitive Recovery Agency to investigate my criminal record, driving record and to acquire any other information, which may be deemed necessary for membership/registration and certification through the National Fugitive Recovery Agency, the National Fugitive Recovery Institute, etc. I understand that I am required to pay an initial membership/registration fee in the amount of \$250.00, of which is enclosed herein. I further understand that I must renew my membership/registration on an annual basis and that currently the renewal fee is \$50.00. I understand that the Identification Card and Badge issued to me through the National Fugitive Recovery Agency is exclusively the property of the National Fugitive Recovery Agency, and that upon my resignation and/or dismissal, I am required to return to the National Fugitive Recovery Agency the property of which was placed in my custody. I further understand that this application may be refused and/or denied and any and all fees to be forfeited if this application is found not to be accurate or complete, or on the grounds of criminal record that is either active or not expunged and/or sealed.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

Please be advised that the membership package includes the following:

- National Fugitive Recovery Agency Official Membership Certificate (recognizing the member as a Registered Bail Enforcement Agent)
- National Fugitive Recovery Agency Official Identification Card
- National Fugitive Recovery Agency Official Shield (Badge) (identifying the member as a Bail Enforcement Agent)
- National Fugitive Recovery Agency Window Decal
- National Fugitive Recovery Agency Patch
- Listing in the National Registry
- Listing in the National Fugitive Recovery Agency's Annual Directory

**National Fugitive Recovery Institute:**

I wish to enroll in the following Certification Course(s):

- Fugitive Recovery Agent Certification Course - \$350.00 Members or \$450.00 Non-Members
- Fugitive Recovery Special Agent Certification Course - \$550.00 Members or \$650.00 Non-Members
- Fugitive Recovery Self-Defense Certification Course - \$250.00 Members or \$350.00 Non-Members
- Fugitive Recovery Instructor Certification Course - \$950.00 Members or \$1250.00 Non-Members

I am making payment for the Certification Course(s) listed above as follows:

- Payment in Full by Certified Check or Money Order (20% Tuition Discount applied)
- 50% Down Payment and 50% due within 90 days of enrollment
- 50% Down Payment and six (6) equal monthly installments of \$\_\_\_\_\_

I, \_\_\_\_\_, hereby agree to the above tuition payment agreement and hereby enclose my Enrollment fee in the amount of \$50.00 along with the Tuition Payment as indicated above.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

Make all Checks and/or Money Orders payable to:

**National Fugitive Recovery Agency**

Post Office Box 336  
Bloomfield, New Jersey 07003

Phone: (973) 766-2499

Email: fugitiverecoverynet@lycos.com

-----FOR OFFICE USE ONLY-----

Approved: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_ Renewal Date: \_\_\_/\_\_\_/\_\_\_

Badge No: \_\_\_\_\_ Agent Level: \_\_\_BEA \_\_\_FRA \_\_\_FRSA (\_\_\_Jr \_\_\_Sr)

Certifications: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_