

ASSOCIATION OF SACRAMENTO COUNTY SHERIFF'S DEPARTMENT VETERANS AND EMPLOYEES



KNOWN AS "711 CLUB"

Application

Last Name*	First*	Middle*
.1.000		
Address*	City*	State* Zip*
(')	()	
Home Phone*	Cell Phone	
E-Mail Address		
Date of Birth	Date of Hire	Date of Retirement
Name of Beneficiary (if applicable)*		Relation to Member
Signature*		Date
(* Required information)		
Regular Membership: ☐ Regular Membership is open to all sworm at employee or reserve officer of the state of	•	Any retired, active, former
Associate Membership: Associate Any person who has been closely a 711 Club is eligible for membershi Peace Officer from outside jurisdic	p Associate membership includes	Federal and State Peace Officers,
Membership dues are \$24.00 a year	r. They are due January 1st of each	ı calendar year.
Mail Application and check to		
711 Club 640 Bercut Drive		

Sacramento, CA 95811

711 Club

Vital Statistics Name:			
Date of Birth:		Place of Birth: _	
Name of Spouse:			
Number of Children & Names	:		
Education			
High School:		_College:	
Degrees:			_
Military Information Branch of Service:		Year	_to
Decorations:			
Law Enforcement Agency:	Hiro Date:	Retirement	Date:
Date of Promotion:	Rank:	Date:	Rank:
Assignments:			
Decorations:			
Personal Request for SSD Honor Guar	d: Yes/No		
Request Chaplaincy: Yes / N	o		
Religious Preference:			
Requested Eulogist:			
*Place additional information on bac	k of form		2