American Correctional Officer

Organizational Membership Application

Organization:_____
Address: _____
City/Town:_____ State:_____ Zip:_____
Email Address: _____
Contact Person: _____
Phone Number: _____Fax: _____

Organizational membership dues are $1.00 per year for up to 2,500 Correctional Officers in your organization. For organizations with less than 500 members there is a minimum annual dues of $500.00.

Organizations with less the 500 Officers:	$ 500.00	annual dues
Organizations with 2,500 or more Officers:	$2,500.00	annual dues
Organizations with more than 500 Officers, but less than 2,500	$1.00 X (#of Officers) = $_____.___	annual dues.

Your membership in American Correctional Officer guarantees your organization a seat on the ACO Board. As a National Director you will vote on all issues coming before ACO and determine our agenda. A National Director or Organizational Member cannot be removed absent a 2/3 majority vote by all National Directors.

Mission Statement

"The mission and purpose of American Correctional Officer is to promote the well being and safety of publicly employed Correctional Officers and corrections professionals; to improve the working conditions for all who work in public corrections; to share best practices so that all can benefit; to educate the media, general public and our elected officials about the daily challenges we face; to seek progressive change to meet those challenges; to provide information, research and mutual support for all associations, unions and fraternal organizations who count corrections professionals among their members; to establish an international communications network among corrections professionals; to provide a national voice for our profession and to continue to protect the public by working to ensure that our nations prisons, jails and juvenile justice facilities are safe and secure."

We support the goals and objectives of American Correctional Officer. We agree to uphold ACO's mission and to maintain a zero tolerance policy for prison privatization.

Signed: _____ *Date:*_____/_____/_____

Please make checks payable to
American Correctional Officer
PO Box 1175
Thayne, WY 83127