



CHP 11-99 FOUNDATION

Membership Upgrade

Thank you for your interest in upgrading your existing membership.

Your total upgrade fee due is the difference between what you have already paid in membership fees for your current level and the price of your **NEW** desired membership level. E.g. You joined at the Classic level for \$3,000, so you would pay an additional \$2,000 to upgrade to the Bronze level. For couples - if you paid \$4,000 for your Classic level membership with your spouse/partner, you would pay an additional \$2,500 to upgrade to Bronze level (Note: Silver - Diamond levels include a Spouse/Partner, no additional fee required).

If you are unsure of your giving history, or would like to discuss your upgrade options please contact our Philanthropy team: Lupe Guzman, Bryce Stowell, and Eric Ewing at upgrades@chp11-99.org or 714.529.1199

Step 1: Primary Member Information - Please check one: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr. ☐ Other _____

Legal Name _____ ☐ M ☐ F DOB ____/____/____ Must match full legal name on driver's license Must be 25 or older ☐ Home ☐ Cell ☐ Bus.
Member ID# _____ Email _____ Phone _____
Mailing Address _____ City _____ State _____ Zip _____ ☐ Home ☐ Bus.

Step 2: Spouse/Partner Information - (if applicable) Please check one: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr. ☐ Other _____ (Spouse/Partner is a domestic or life partner. Children and/or business partners do not qualify.)

Legal Name _____ ☐ M ☐ F DOB ____/____/____ DL# _____ State _____ Must match full legal name on driver's license Must be 25 or older ☐ Home ☐ Cell ☐ Bus.
Member ID# (if applicable) _____ Last 4 of SS# _____ Email _____ Phone _____ only if applying
Mailing Address _____ City _____ State _____ Zip _____ ☐ Home ☐ Bus.

Step 3: Upgrade Selection & Payment - Please select your desired membership level (Spouse/Partner included Silver - Diamond levels):

☐ DIAMOND \$250,000 ☐ PLATINUM \$100,000 ☒ GOLD \$25,000 ☐ SILVER \$10,000 ☐ BRONZE \$5,000
(+\$1,500 for Spouse/Partner)

☐ Pay Full Upgrade Amount ☐ Make Payments - please select your preference from the following: ☐ Monthly ☐ Quarterly ☐ Annually

Upgrade Amount Total \$ _____ ☐ Check (payable to **CHP 11-99 Foundation**) ☐ Credit Card ☐ Stock ☐ Donor Advised Fund

Credit Card # _____ Exp ____/____ CVV _____ Billing Zip _____

Additional Support - 11-99 Monthly Giving Program - View more at chp11-99.org/give-1199.

☐ **YES!** I would like to provide ongoing support through the 11-99 Monthly Giving Program. I hereby authorize my credit card above to be charged in the amount of \$ _____ (\$11.99 or more) on the _____ day of the month starting in ____/____/____
Recurring payment may be canceled at any time. Month Year

Step 4: Shipping Information - ☐ Same as above (PO Box: If we need to ship UPS, please also provide a physical shipping address below:

Ship to: _____ City _____ State _____ Zip _____

Special Instructions: _____

Step 5: Membership Terms & Conditions Agreement - Signature(s) Required Below

I declare under penalty of perjury that I have no felony convictions. I hereby authorize you to conduct a complete background investigation prior to or during my association with the CHP 11-99 Foundation, which will include, but not be limited to, driver's license status, criminal history and public records. I waive any right I may have to request or receive a copy of the results of such investigation. Causes for denial of membership: Any applicants with felony arrests or charges that have been reduced is cause for denial. Recent arrests for alcohol/drugs DUI is cause for denial. If it is discovered after the background investigation is completed that the applicant has had more than three law enforcement contacts of any nature within a year, it is cause for denial. If I am accepted, I understand that (a) the identification materials issued shall remain the sole property of the CHP 11-99 Foundation, (b) association does not authorize me to exercise any (i) peace officer powers or privileges, or (ii) leniency or preferential treatment in any contact involving a law enforcement agency by either physically presenting an 11-99 membership item or verbally discussing my membership and/or association with the CHP 11-99 Foundation, (c) any abuse of association privileges or property shall result in my immediate termination, and (d) my association may be revoked at any time without cause and at the sole discretion of the CHP 11-99 Foundation. I agree to surrender, for any reason, any and all donor benefits and identification materials, including license plate frames, upon request by the members of the CHP 11-99 Foundation's Board of Directors or their agent.

Primary Member SIGNATURE _____

Please select new membership package items on reverse side.

Spouse/Partner SIGNATURE _____

(if applicable)

For Office Use Only: Rec'd _____ Event ID _____ Ref _____ Mail Code **YE25**

All information provided is kept strictly confidential.



MEMBERSHIP PACKAGE ITEMS

The Fair Market Value (FMV) of any items received with your membership is not tax-deductible.

View photos and tax info at chp11-99.org/member-items.

Please **SELECT** ☒ the items below that you wish to receive in your membership package under the corresponding level.
Couples will each receive these items unless otherwise specified.

☐ Check here if you wish to **DECLINE** all merchandise. No membership items will be sent if selected.



Diamond Level



- | | | |
|--|---|---|
| <input type="checkbox"/> Private Events with CHP Top Brass & 11-99 CEO | <input type="checkbox"/> Name Displayed at 11-99 Headquarters & Recognition in Annual Report | <input type="checkbox"/> Diamond Crystal Shield Award |
| <input type="checkbox"/> Recognition in Perpetuity at the CHP Academy Museum | <input type="checkbox"/> Name Displayed at Annual Scholarship Ceremonies | <input type="checkbox"/> Diamond Membership Credentials |
| <input type="checkbox"/> Hosted Travel & Tour of the CHP Academy | <input type="checkbox"/> Diamond License Plate Frames (Black with Chrome Lettering "Diamond Level") | <input type="checkbox"/> Premium Leather Goods |
| <input type="checkbox"/> Exclusive Invitations to 11-99 Events | | <input type="checkbox"/> Premium Crystal Glassware |

Platinum Level

- | | | |
|---|--|--|
| <input type="checkbox"/> Personalized Platinum Award* | <input type="checkbox"/> Suede Jacket with 11-99 Logo**
Primary Applicant Size _____
Spouse/Partner Size _____ | <input type="checkbox"/> 11-99 Logo Cap <input type="radio"/> Black <input type="radio"/> Navy |
| <input type="checkbox"/> Platinum Level Watch <input type="radio"/> Men's <input type="radio"/> Women's | <input type="checkbox"/> Duffel Bag | <input type="checkbox"/> (2) License Plate Frames/Applicant
(Black with Platinum Lettering) |
| <input type="checkbox"/> Recognition Foundation's Annual Report | <input type="checkbox"/> Dopp Kit (Toiletry Bag) | <input type="checkbox"/> Leather Registration Holder |
| <input type="checkbox"/> Invitations to Exclusive Events | <input type="checkbox"/> (2) Coffee Tumblers/Household (Black) | <input type="checkbox"/> Leather Wallet with Brass ID Card* |
| <input type="checkbox"/> Laptop Backpack | | <input type="checkbox"/> Plastic ID Card* |
| <input type="checkbox"/> Messenger Bag | | |

Gold Level

- | | | |
|--|--|---|
| <input type="checkbox"/> Crystal Star Award* | <input type="checkbox"/> Duffel Bag | <input type="checkbox"/> (2) License Plate Frames/Applicant
(Chrome with Gold Lettering) |
| <input type="checkbox"/> Jacket with 11-99 Logo**
Primary Applicant Size _____
Spouse/Partner Size _____ | <input type="checkbox"/> Dopp Kit (Toiletry Bag) | <input type="checkbox"/> Leather Registration Holder |
| <input type="checkbox"/> Laptop Backpack or <input type="checkbox"/> Messenger Bag | <input type="checkbox"/> (2) Coffee Tumblers/Household (Navy) | <input type="checkbox"/> Leather Wallet with Brass ID Card* |
| | <input type="checkbox"/> 11-99 Logo Cap <input type="radio"/> Black <input type="radio"/> Navy | <input type="checkbox"/> Plastic ID Card* |

Silver Level

- | | | |
|--|--|---|
| <input type="checkbox"/> Crystal Star Award* | <input type="checkbox"/> Laptop Backpack, or <input type="checkbox"/> Messenger Bag | <input type="checkbox"/> (2) License Plate Frames/Applicant
(Chrome with Silver Lettering) |
| <input type="checkbox"/> Jacket with 11-99 Logo**
Primary Applicant Size _____
Spouse/Partner Size _____ | <input type="checkbox"/> Dopp Kit (Toiletry Bag) | <input type="checkbox"/> Leather Registration Holder |
| | <input type="checkbox"/> (2) Ceramic Coffee Mugs/Household (Navy) | <input type="checkbox"/> Leather Wallet with Brass ID Card* |
| | <input type="checkbox"/> 11-99 Logo Cap <input type="radio"/> Black <input type="radio"/> Navy | <input type="checkbox"/> Plastic ID Card* |

Bronze Level

- | | | |
|---|---|---|
| <input type="checkbox"/> Crystal Star Award* (Primary Applicant only) | <input type="checkbox"/> (2) License Plate Frames/Applicant
(Chrome with Bronze Lettering) | <input type="checkbox"/> Leather Wallet with Brass ID Card* |
| <input type="checkbox"/> Laptop Backpack | <input type="checkbox"/> Leather Registration Holder | <input type="checkbox"/> Plastic ID Card* |

*For ID cards & personalized items, clearly print your preferred name for engraving below. By default, we will engrave First & Last name.

Primary Applicant Engrave Name

Spouse/Partner Engrave Name (if applying)

For recognition, please print your preferred name(s) below, **no middle initials** (E.g. The Smith Family Foundation, Karen & Tony Smith).

☐ Anonymous - no public acknowledgment, tax acknowledgment only ☐ Same as Engraving Name(s) Above

☐ Other _____

****SIZING:** Jackets avail in Men's S-3XL & Women's XS-2XL, and run true to size (W ARE FITTED)

Federal Tax ID #95-6530738

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