



Village of Delhi  
Police Department

P.O. Box 328 • 9 Court Street • Delhi, New York 13753

Tel (607) 746-2249 • Fax (607) 746-6149

## LEOSA (HR-218) Registration Form

**PHOTO FOR ID CARD (Shoulders Up) - yes no**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Active OR Retired (Must Check ONE box)

Were you a Police Officer? YES NO

Were you a Peace Officer? YES NO

What agency did you retire from? \_\_\_\_\_

What was your title/rank? \_\_\_\_\_

Copy of your Dept. ID card = YES NO

ALL LEGAL FIREARMS – (check box for **ACTIVE** officers only!)  
OR Provide Make, model and serial # - Retired Officers.

MAKE: \_\_\_\_\_

MODEL: \_\_\_\_\_

Serial # - \_\_\_\_\_

Cell phone # \_\_\_\_\_

Mailing Address to send ID to: \_\_\_\_\_

\_\_\_\_\_

DATE: \_\_\_\_\_