2025

ARKANSAS MUNICIPAL POLICE

ASSOCIATION

88[™] ANNUAL CONVENTION



WHEN: July 29, 2025 – AUGUST 1, 2025 WHERE: HOTEL HOT SPRINGS 305 MALVERN AVE HOT SPRINGS, ARKANSAS 71901 (501)623-6600 – (877)623-6697

Room rates: \$111.00 for Single per night

\$121.00 for Double per night

The rooms are blocked and priced for AMPA Conference so make sure you tell them it is for the AMPA Conference. Rooms must be reserved by July 1, 2025 (Group Code- AMPA 25)

Golf Tournament will be on July 29, 2025. TBA



ARKANSAS MUNICIPAL POLICE ASSOCIATION

GARY MILLER MEMORIAL GOLF TOURNAMENT

88th ANNUAL CONVENTION July 29, 2025

4 PERSON SCRAMBLE

Diamondhead Golf Club 245 Independence Dr Hot Springs, AR 71913

Check In: 11:00 AM Tee Off 12:00 PM \$65.00/ player includes Range Balls, Cart, Tournament Golf Shirt, Hat and Refreshments.

Please return this form and check(s) made payable to AMPA to:

AMPA Golf 305 Stone Ave Mountain View, AR 72560

PLAYER INFORMATION

| TEAM CAPTAIN: | | | - | | |
|--------------------|--|------------|---|------------|--|
| ADDRESS: | | | | | |
| CITY, STATE, ZIP: | | | | | |
| TELEPHONE # | | | | | |
| EMAIL ADDRESS: | | | | | |
| SHIRT SIZE (M-XXL) | | | _ | | |
| | | | | | |
| TEAM MEMBER: | | TELEPHONE# | | SHIRT SIZE | |
| TEAM MEMBER: | | TELEPHONE# | | SHIRT SIZE | |
| TEAM MEMBER: | | TELEPHONE# | | SHIRT SIZE | |

(ENTRIES MUST BE RECEIVED BY July 20, 2025 TO GUARANTEE A SHIRT)

NOMINATIONS ARE NOW BEING ACCEPTED



REPRESENTED WHEN A MEMBER GOES ABOVE AND BEYOUND THE CALL OF DUTY FOR THE Association.

The awards will be presented at the Annual AMPA Convention July 31, 2025. Nominations must be received by June 20, 2025. The nominee must be a member of Arkansas Municipal Police Association.

> Mail or email Nomination to: AMPA 305 Stone Ave Mountain View, AR 72560 ampa1936@yahoo.com

NOMINATIONS ARE NOW BEING ACCEPTED



REPRESENT THE HEROISM OR SELFLESS ACTIONS EXHIBITED BY SOMEONE HELPING OTHERS IN THE COMMUNITY.

The awards will be presented at the Annual AMPA Convention July 31, 2025. Nominations must be received by June 20, 2025. Recipients can be Police Officers or Non-Law Enforcement Civilians.

The winner of Huey Chastain Humanitarian Award will have his or her room paid by the Association for Thursday night July 31, 2025.

> Mail or email Nomination to: AMPA 305 Stone Ave Mountain View, AR 72560 ampa1936@yahoo.com

Howard Cox/Ricky Riggins Memorial Scholarship Scholarship Application

To be eligible for application, high school students must have a "C" AVERAGE or ABOVE, submit an OFFICIAL HIGH SCHOOL TRANSCRIPT, and submit at least TWO LETTERS OF RECOMMENDATION, from community member, pastor, faculty member, employer, etc. who is <u>NOT</u> a family member or relative. **Applicants MUST be an AMPA member, spouse, or dependent. Members and spouses should submit this form and a class schedule only.**

PLEASE TYPE OR PRINT CLEARLY

| Name: | Date of Birth: | | | | |
|--------------------------------|---|--|--|--|--|
| Address: | | | | | |
| Home Phone: | _ Cell Phone: | Work Phone: | | | |
| Member's Name: | Agency: | | | | |
| Relation to Member: (Self/S | pouse/Dependent) | | | | |
| High School: | Most Current Cumulative GPA: ACT Score: | | | | |
| College Attending: | Major Field Area: | | | | |
| Anticipated plans for future e | ducation and career af | ter high school graduation: (Why this field?, etc) | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Type a **one page biography**; include any organizations to which you may belong, offices held, awards &/or scholarships, received & any accomplishments, or special classes that are important to you. Include church involvement and/or community service, as well. Please describe your academic and career plans. Include at least one paragraph describing how you would put this scholarship to good use should it be awarded to you.

Completed application must be POST-MARKED by **June 20, 2025.** Applications may **NOT** be dropped off at the AMPA office or hand delivered–it <u>must be mailed</u> through the post office.

Failure to complete the application honestly and in its entirety with all requirements included may result in disqualification.

Mail to: Arkansas Municipal Police Association, Inc. ATTN: AMPA SCHOLARSHIP COMMITTEE 305 Stone Ave Mountain View, Arkansas 72560

ARKANSAS MUNICIPAL POLICE ASSOCIATION

MEMBERSHIP APPLICATION FORM

305 Stone Ave Mountain View, AR 72560

(479) 637-2058

| NAME: | DOB: | _SSN: | | | |
|---------------------|----------------------|----------|--|--|--|
| MAILING ADDRESS: | | | | | |
| CITY: | | ZIP: | | | |
| HOME PHONE: | | | | | |
| BENEFICIANY | | | | | |
| NAME: | RELAT | IONSHIP: | | | |
| BENEFICIANY SSN: | | | | | |
| POLICE DEPT: | DEPT PHONE: | | | | |
| DEPARTMENT ADDRESS: | | | | | |
| CITY: | | ZIP: | | | |
| RANK: | _STATUS: ACTIVE LEO: | RETIRED: | | | |
| LENGTH OF SERVICE: | EMAIL ADDRE | SS: | | | |

Membership: \$36 per year, make checks payable to

Arkansas Municipal Police Association

Mail to:

Arkansas Municipal Police Association

305 Stone Ave

Mountain View, AR 72560