

Application for Membership  
**TENNESSEE ORGANIZATION OF LOCKSMITHS (TOOL)**  
c/o Jefferson Lock and Safe, 344 Summit Hts Dr.,  
Jefferson City, TN 37760

Please print all answers using black ink.

\_\_\_\_\_  
Name: First                      Middle                      Last                      Titles (CML, CPS, etc)                      Birth date

\_\_\_\_\_  
Business Name (Employer's name if you are an employee)                      (    )  
Business Telephone #

\_\_\_\_\_  
Business Address                      (    )  
Cell Phone #

\_\_\_\_\_  
City                      State                      Zip code                      Fax telephone #

\_\_\_\_\_  
e-mail address                      web site

If you are a locksmith in Tennessee, Alabama, North Carolina, or Virginia:  
Your individual license # \_\_\_\_\_ Your business license # \_\_\_\_\_

If you are not a locksmith in Tennessee, Alabama, North Carolina, or Virginia:  
Business License # \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_  
Please attach a current copy of your business license and a business card.

Are You:  Sole Owner                       Partner                       Employee                       Student?  
If employee, give name of shop owner: \_\_\_\_\_

\_\_\_\_\_  
Home Address                      (    )  
Home Telephone #

\_\_\_\_\_  
City                      State                      Zip

Send Mail to:  Business  Home. Preferred Name/Nickname \_\_\_\_\_

Are you currently working in the security industry?  Yes  No  
If yes, how long? \_\_\_\_\_ Percent of work spent in locksmithing \_\_\_\_ %

How did you learn locksmithing? \_\_\_\_\_

What areas do you specialize in? \_\_\_\_\_

What locksmith certifications do you have? \_\_\_\_\_

List each locksmith association you are a member of and your membership number:

\_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_ If yes, when: \_\_\_\_\_

Charge \_\_\_\_\_ Where \_\_\_\_\_

TOOL Sponsors (if any)

1. \_\_\_\_\_ 2. \_\_\_\_\_

Type of Membership -- Please check only one:

**Active Membership** -- Individuals engaged in the locksmith trade currently possessing a valid state locksmith license from Tennessee, North Carolina or Virginia, or a business license from other states or working for a licensed locksmith.

**Associate Membership** -- Individuals involved in the manufacturing or distribution of equipment or services to the locksmith or security industry.

**Apprentice / Student Membership** -- Individuals undergoing training to become a locksmith. Apprentice/Student membership is limited to only two years for individuals 16 or over.

Submit annual dues in the amount of \$100.00 with this application. In addition a separate non-refundable application fee of \$30.00 is also due with this application. If the application is not approved, only your dues will be refunded to you.

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I certify that all statements in this application are true. If accepted as a member, I agree to abide by the By Laws of TOOL and any other rules or regulations passed by the Board or membership. I also understand that failure to provide truthful information on this application may cause revocation of my membership in TOOL.

I further authorize TOOL representatives to perform a background check and investigate all character references and statements made on this application..

Signature \_\_\_\_\_ Date \_\_\_\_\_

for office use only: Date Dues Paid \_\_\_\_\_ Date received by Secretary \_\_\_\_\_  Background Check  
TOOL Board vote. \_\_\_\_\_ Date Accepted \_\_\_\_\_ Date Notified \_\_\_\_\_ (Revised 2009 September 21)