

NEW YORK STATE SOCIETY of WASHINGTON, DC

Membership Application

Please provide the following information:

Names(s):	<input type="text"/>		
Address:	<input type="text"/>		
City:	<input type="text"/>		
State:	<input type="text"/>	ZIP:	<input type="text"/>
Phone: (home)	<input type="text"/>	Phone: (work)	<input type="text"/>
Email:	<input type="text"/>		
Occupation:	<input type="text"/>		
Company:	<input type="text"/>		
New York Affiliation:	<input type="text"/>		

(specify name of hometown, college, business, friend etc.)

Annual Dues:

- \$20.00 - Single
- \$25.00 - Couple
- \$35.00 - Family (includes children under 18 yrs. of age)
- \$250.00 - Friend
- \$500.00 - Benefactor

Committee(s) interest:

- Congressional Reception
- Special Events
- Buffalo Nite in Washington, DC
- Newsletter
- Corporate Support
- Membership

If paying by check...

Please submit or print this form and send along with your check payable to NYSS to:

NYSS/Membership
c/o Beverly Frey
10024 Parley Drive
Tampa, FL 33626

**If you have difficulties submitting form via the submit button above, please print and mail completed form to address above or save completed form as a pdf and email to NYSSI@verizon.net.*