



Membership Information Form

Name: _____

Home Address: _____

Home Phone: _____ Home Fax: _____

Cell Phone: _____ Home E-mail: _____

School or Business Name: _____

Work Address: _____

Work Phone: _____ Work Fax: _____

Work E-mail: _____

Region: (Circle one)

Adirondack	Central	Elmira-Binghamton	Genesee Valley
Long Island	Lower Hudson	Mid-Hudson	Mohawk/Capital
New York City	Northern	Western	

Membership type: Individual Organization New Renewal

N.B. NYSTEA does not sell its membership list. All information is strictly published for the use of its membership.

Please enclose \$65 for dues and send to:

NYSTEA Membership
63 Hecla Street
Buffalo, NY 14216

(Checks made payable to NYSTEA)

www.nystea.org