



2019 NYSDTSEA Membership Application

January 1, 2019 to December 31, 2019

Name:	
Address:	
City:	State:
County:	Zip Code:
Name of School:	
Work Phone:	Home Phone:
Email:	Fax:
Membership Type: _____ Membership Fee: _____ Type: Parents: \$1.00 Student: \$20.00 Associate: \$25.00 Retiree: \$25.00 2019 Professional Membership (Paid before 3/01/19) Professional: \$25.00 Corporate: \$100.00 2019 Professional Membership Fee Special - \$20 (Paid before 3/01/19)	MV283 # _____ Certificate <input type="checkbox"/> Provisional <input type="checkbox"/> Permanent Is this a renewal from last year? <input type="checkbox"/> Yes <input type="checkbox"/> No Professional & Retired Members are voting members per constitution acceptance.
Send check or money order payable to NYSDTSEA to:	
NYSDTSEA P. O. BOX 2385 Binghamton NY 13902	
Amount Enclosed _____	
For more information email info@nysdtsea.org	