

New York State Assessors' Association

Membership Application

Print this page, complete application and return with check or completed municipal voucher:

First Name:	
Middle Name:	
Last Name:	
Title:	Sole Appointed Assessor [], Sole Elected Assessor [], Member Board of Assessors [], Chairman Board of Assessors [], Other [] Specify: _____
Municipality or Firm:	
	Town [], Village [], City [], County []
County:	
Office Address:	
Home Address:	
Office Phone:	
Home Phone:	
Fax Number:	
Email Address:	
Name of Spouse:	
Date of Birth:	
Local Newspaper:	

REGULAR MEMBER:	Non- Assessor	\$ 85
------------------------	---------------	-------

REGULAR MEMBER:	Assessor 1 Municipality	\$ 85
REGULAR MEMBER:	Assessor 2-3 Municipalities	\$ 100
REGULAR MEMBER:	Assessor 4-5 Municipalities	\$ 115
REGULAR MEMBER:	Assessor 6 or more Municipalities	\$ 130

ASSOCIATE MEMBER:	Non-Government Employed	\$ 135
ASSOCIATE MEMBER:	Government Employed	\$ 85
ORGANIZATIONAL MEMBER:	(Group Rates Available)	\$ 425

UPDATED 12/10/09

Make checks Payable to: **New York State Assessors' Association**
 Mail to: **Thomas Frey, IAO Executive Director, PO Box 888, Middletown, NY 10940**