

# 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 [ ], Retired [ ], 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:	

<b>REGULAR MEMBER:</b>	\$ 100
(Retired Regular Member Dues with 50% Discount: \$50.00)	
<b>REGULAR MEMBER:</b> Assessor 1 Municipality	\$ 100
<b>REGULAR MEMBER:</b> Assessor 2-3 Municipalities	\$ 115
<b>REGULAR MEMBER:</b> Assessor 4-5 Municipalities	\$ 130
<b>REGULAR MEMBER:</b> Assessor 6 or more Municipalities	\$ 145
<b>ASSOCIATE MEMBER:</b> Non-Government Employed	\$ 150
<b>ASSOCIATE MEMBER:</b> Government Employed	\$ 100

UPDATED 1/1/2018

Make checks Payable to: **New York State Assessors' Association**  
 Mail to: **David W. Briggs, FIAO Executive Director, PO Box 5586, Cortland, NY 13045**