



APPLICATION FOR REGULAR MEMBERSHIP

(Please print or type)

Application for membership in the NYSESA and local NY Chapter(s)

Regular Member

Regular Applicant Member**

COMPANY INFORMATION

Company Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone: _____

(_____) _____

Website: _____

NY Alarm License #: _____

COMPANY CONTACT

Designated Voting Rep: _____

Title: _____

Email: _____

DUES SCHEDULE: Total Annual Dues = Local Chapter(s) + NYSESA (For 2020 Membership)

Local Chapter(s) Dues:

<input type="checkbox"/>	CNYAA	\$100	<input type="checkbox"/>	NYSESA	\$100
<input type="checkbox"/>	HMAA	\$100	<input type="checkbox"/>	RASIA	\$100
<input type="checkbox"/>	LIAA	\$147	<input type="checkbox"/>	UNYESA	\$100
<input type="checkbox"/>	MHAA	\$100	<input type="checkbox"/>	WNYESA	\$125

Total Annual Dues:

Total Selected Local

Chapter(s) Dues = _____

Total State

NYSESA Dues = _____

+

\$175

TOTAL DUES = _____

Select the Local Chapter(s) you are applying for membership – if you do not select a chapter we will assign your chapter based on your geographic location...

Applicant agrees to abide by all by-laws & code of ethics as adopted by the membership of the NYSESA.

** Regular Applicant status means you are currently working towards a NYS License or have applied for a license.

Payment Type:	Master Card	VISA	American Express	Check Payable to NYSESA _____
Card #:	_____			Expiration Date: _____
Card Holder Name:	_____		Card Security Code: _____	Card Zip Code: _____
Card Holders signature:	_____			

Please submit this application and first full year dues payment to the NYSESA at the address listed below.

Membership is not transferable. Dues are not refundable. Membership is based on a calendar year (January 1 thru December 31). New members joining throughout the year will receive a pro-rated credit of their dues applied towards the subsequent year's dues renewal.

1971 Western Avenue - PMB # 1105, Albany, NY 12203
 (800) 556-9232 (NY) • (814) 838-0301 (Outside NY) • (814) 838-5127 FAX