



New York Association
of Local Government Records Officers

Membership Application

New
 Renewal
 Replacement for: _____

Regular Membership \$30
 Associate Membership \$15
 Corporate Membership \$250

Membership: January 1st to December 31st

Name: _____

Title: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (____) _____

Fax: (____) _____

E-mail: _____

URL: _____

Region: _____

Type of Government: (Circle all that apply)

County:	City	Town	Village
School District	BOCES	Fire District	Business

Mail completed application and a check to:

NYALGRO
Pam Brown, VP Membership
P.O. Box 18
Panama, NY 14767