



**NEW YORK STATE TELECOMMUNICATIONS  
ASSOCIATION, INC.**  
 SUITE 650 • 100 STATE STREET  
 ALBANY, NY 12207  
 (518) 443-2700 • FAX: (518) 443-2810  
[www.nysta.com](http://www.nysta.com)

**NEW YORK STATE TELECOMMUNICATIONS ASSOCIATION, INC.  
 APPLICATION FOR MEMBERSHIP AS A  
 CATEGORY III MEMBER**

Date of Application: \_\_\_\_\_

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Legal Name of Individual, Firm, Partnership or Corporation

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DBA (if applicable)

Main Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 \_\_\_\_\_ Fax: \_\_\_\_\_  
 \_\_\_\_\_ E-mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_ Website: \_\_\_\_\_  
 \_\_\_\_\_

Primary Contact: Person to whom information and dues statements should be sent and who will be listed in the NYSTA Directory:

Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 \_\_\_\_\_ Fax: \_\_\_\_\_  
 \_\_\_\_\_ E-mail: \_\_\_\_\_

Please indicate the products or services your company offers to the Category I and/or II Members.

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Referred By: \_\_\_\_\_  
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Any individual, firm, partnership, or corporation, or the authorized representative of such an entity, with interests in common with the organization, and providing service to current Category I or Category II Members, and not otherwise eligible for Category I or Category II Membership, is eligible to become a Category III Member upon approval by the Board of Directors. Each Category III Member in good standing shall be entitled to one vote as to the Board Category III Member. Such vote may be cast by the Chief Executive Officer, or any other accredited representative of such company, so designated prior to the meeting and reported to the NYSTA office. Category III Members shall not be entitled to vote in any meeting of the Membership.

Any member who has resigned and is interested in reapplying is charged for the current year's dues as well as back dues for a maximum of two years or \$590.

Annual dues in the amount of \$350 shall be payable, in advance, in January of each year.

Any Company considering joining the Association should be aware of the updated dues schedule:

<b>MONTH</b>	<b>AMOUNT DUE</b>
January 1 – June 30	\$350
July 1 – December 31	\$225*

\* Fee will carry member the remainder of the year - will be billed for the next year on January.

**To pay your dues by credit card please provide the following information, and please remember to print clearly.**

**Name of Cardholder** \_\_\_\_\_

**Card Number** \_\_\_\_\_

**Card Type** \_\_\_\_\_ **American Express** \_\_\_\_\_ **Visa** \_\_\_\_\_ **Master Card**

**Expiration Date** \_\_\_\_\_

SUBMIT APPLICATION WITH APPROPRIATE DOCUMENTATION TO:

Membership and Bylaws Committee  
 New York State Telecommunications Association, Inc.  
 Suite 650, 100 State Street  
 Albany, NY 12207

Please call 518-443-2700 if there are any questions.

**MEMBERSHIP & BYLAWS COMMITTEE USE ONLY**

**Recommended**

\_\_\_\_\_

Committee Chairman \_\_\_\_\_ Date \_\_\_\_\_

**Board Approval**

\_\_\_\_\_

Board Secretary \_\_\_\_\_ Date \_\_\_\_\_