
MEMBERSHIP APPLICATION

Applicant Information

Name: _____
Title: _____
Company Name: _____
Work Address: _____
City, State, Zip: _____
Work Phone: _____
Email: _____
Home Address: _____
City, State, Zip: _____
Preferred Home Work
Mailing Address: _____
Home Phone: _____
Email: _____

Dues Requested

Chapter Dues: **\$60**
(includes membership in New York Women, Inc.)

Dues may be remitted to:

Capital Region Women's Network, P.O. Box 391 Delmar, NY 12054

NYS Women, Inc. promotes full participation, equality, and economic self-sufficiency for working women.

The objectives of NYS Women, Inc. are to:

- elevate the standards for women in business and the professions,
- promote the interests of business and professional women,
- bring about the spirit of cooperation among business and professional women, and,
- extend opportunities to business and professional women through education.

Membership is open to women and men who are actively engaged in business or in the professions who support the objectives of NYS Women, Inc.