



2019-2020 NYSPPSA Membership Renewal

Membership covers the period from April 1, 2019 through March 31, 2020

DUE BY APRIL 30, 2019

One Year Regular Membership Fee is \$150.00 (NY Members Only)

One Year Associate Membership Fee is \$100.00 (Outside NY Members Only)

One Year Basic Membership Fee is \$50.00 (NY Members Only)

Voluntary Contribution to support Legislative Committee \$25.00

Please provide your contact information to insure that directory/website profile is current:

Your Name _____ Date of Birth _____

Firm Name _____

Mailing Address _____

Street Address _____

Telephone _____

Daytime (Office)

Toll Free

Fax

Cell

Email _____ Website _____

Licensing Number: _____ **Required if serving within the 5 boroughs of NY**

Has your authority to serve process ever been revoked? _____ (If yes, please explain)

List me in the directory under the City of: _____

Counties of service: _____

(Limit of 10 counties)

Additional listings \$50 per City: _____

My services are: (indicate all that apply)

Process service, court filings, court searches, skip trace, subpoena preparation, private investigations, E&O

*****THIS IS YOUR INVOICE*****

Payment Information

___ Regular Member @ \$150 ___ Associate Member @ \$100 ___ Basic Member @ \$50

Voluntary Legislative Contribution \$ _____

Additional City Listings _____ @ \$50 per City = Total \$ _____

\$ _____ **Voluntary Donation to The Bob Gulinello Memorial Scholarship**

PayPal/Credit Card: We accept MasterCard, Visa, and American Express (please circle)

Name (as it appears on card): _____

Card Number: _____ Exp Date: _____ Security Code: _____

****Renew my membership yearly through my credit card expiration date** _____

Check: Please make payable to NYSPPSA

Check Number: _____

Remit checks to P.O. Box 925, Orchard Park, NY 14127

Phone: 888-258-8485 Fax: 877-258-8484 Email: admin@nysppsa.org