



**New York State Conservation Council, Inc.**  
 1060 Broadway #1090, Albany, New York 12204

**OFFICIAL REGISTRATION FORM**

You are hereby advised that dues to the NYS Conservation Council, Inc. for year 2021 are now payable:  
 County Federation: \$250.00 \_\_\_x\_\_\_ Associate Member \$250.00 \_\_\_ Affiliante Member \$100.00 \_\_\_

Please complete the registration form below, make checks payable to **NYSCC**, and return with club listing information and bylaws to: NYSCC, 1060 Broadway #1090, Albany, NY 12204

**Organization Name :**  
**Date of Annual Meeting:**

**Date of Monthly Meeting:**

Name Address

**President:** \_\_\_\_\_ **Street/PO Box:** \_\_\_\_\_  
 \_\_\_\_\_ **City/St/Zip:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Vice President** \_\_\_\_\_ **Street/PO Box:** \_\_\_\_\_  
 \_\_\_\_\_ **City/St/Zip:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Secretary** \_\_\_\_\_ **Street/PO Box:** \_\_\_\_\_  
 \_\_\_\_\_ **City/St/Zip:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Treasurer** \_\_\_\_\_ **Street/PO Box:** \_\_\_\_\_  
 \_\_\_\_\_ **City/St/Zip:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Councilman/  
 Representative** \_\_\_\_\_ **Street/PO Box:** \_\_\_\_\_  
 \_\_\_\_\_ **City/St/Zip:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Alt. Councilman/  
 Representative** \_\_\_\_\_ **Street/PO Box** \_\_\_\_\_  
 \_\_\_\_\_ **City/St/Zip:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Important:** Please enclose your member clubs and bylaws before submitting to NYSCCS. When known, please provide email addresses for club contacts.