



New York State Weights & Measures Association

nyswma.com

MEMBERSHIP APPLICATION

(Federal ID#: 51-0584555)

This is a Professional Association with the purpose of advancing scientific and practical knowledge within the weights and measures community. We urge you to join us in our efforts to promote uniform enforcement and fair, workable legislation.

Please Print

Name _____

Title _____

Jurisdiction / Company _____

Work Address _____

Work City, State & Zip _____

Work Phone (____) _____ - _____ Fax (____) _____ - _____

E-mail Address _____

Home Address _____

Home City, State & Zip _____

Home Phone (____) _____ - _____

_____ Active Membership - you are working as a Weights and Measures official.

_____ Associate Membership - you are a manufacturer, installer, technician or other business.

Please indicate the address you wish to have membership information sent: Work _____ or Home _____

- and the E-mail address you wish to have the NYSWMA Newsletter sent: _____

Dues are \$25 per calendar year. Renewals are due January 1st each year.
Please make check payable to **NYSWMA** and mail with application to:

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