



**NEW YORK STATE ARBORISTS**  
 ISA Chapter, Inc.  
 136 Everett Road, Albany, NY 12205  
 Ph: (518)694-5507 Fx: (518)935-9436  
 www.nysarborists.com  
 info@nysarborists.com



**NYSA New Member & Renewal Application**

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Are you a Certified Arborist?  Yes  No ♦ ISA Certified Arborist Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ & Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Please Note:** *If you've renewed your dues through ISA, please don't send payment. If you plan to return payment for your NYSA membership dues through the enclosed invoice, please do not submit New York chapter dues through ISA. Renew Online Today at [NYSArborists.com](http://NYSArborists.com)*

Visit [www.nysarborists.com](http://www.nysarborists.com) to select your membership level. If you require a change in your membership information, simply email Association Headquarters at [info@nysarborists.com](mailto:info@nysarborists.com).

**Membership Dues**

Membership Category: *(select one)*     Regular-\$65     Educator-\$25     Retired-\$25     Student-\$15

Membership Period: **2019**

Dues Amount: \$ \_\_\_\_\_ *(or provide amount listed above if your status has changed)*

**Areas of Practice** *(select all that apply)*

Agriculture     Commercial/Residential     Consulting     Education/Research     Golf Course  
 Landscape     Municipal/Public Works     Supplies     Training     Utility     Other: \_\_\_\_\_

**Payment Information**

Enclose a check, purchase order or your credit card information below. Please make all checks and purchase orders payable to **NYSA**.

Payment Type:     Check     Credit Card     Purchase Order: \_\_\_\_\_

Credit Card Information     American Express     MasterCard     Visa     Discover

Card Number: \_\_\_\_\_ Exp.: \_\_\_\_\_ Security Code \_\_\_\_\_ Name on Card: \_\_\_\_\_

Billing Information:     Same as above

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Card Holder's Signature: \_\_\_\_\_

**Email, Fax or Mail to**

NYSA • 136 Everett Road • Albany, NY 12205 • Email: [info@nysarborists.com](mailto:info@nysarborists.com) • Fax: 518.935.9436

**Thank you for your continued support!**