New York State Nursery & Landscape Association

Affiliate/Student Member Application

Thank you for your interest in the New York State Nursery and Landscape
Association (NYSNLA), a statewide professional trade association dedicated
to advancing the green industry through promotion of sound business
practices supported by education, relationships and advocacy. By joining NYSNLA,
you'll become a part of a stronger, collective voice in the New York state green industry.



Membership in NYSNLA provides you with the most up-to-date educational programs; networking opportunities; our industry magazine *Nursery Lines*; an interactive calendar of statewide industry events on www.nysnla.com, and listing in our searchable online directory. If you would like to talk more about membership or have questions, please call us at 518.694.4430, or email us at info@nysnla.com.

Effective with the 2018 membership year, individuals who do not own or work for NYSNLA member businesses (including educators, retirees, office holders and CNLPs) may join the state Association as **Affiliate Members**. High-school and college students enrolled in a green or horticulture-related program may join as **Student Members**. Affiliate and Student Members enjoy all the member benefits listed above but are not eligible to serve on the NYSNLA Board of Directors or to vote.

Requiring Affiliate and/or Student Members to pay dues to a regional chapter is at the discretion of each region. Please contact your regional leadership for more information. You can find a list of regional contacts at **NYSNLA.com** or by calling or emailing the NYSNLA office.

You may scan and email this application with payment information to **info@nysnla.com**, fax it with payment information to 518.694.4431, or send it by US Postal Service to:

New York State Nursery & Landscape Association, Inc. I 136 Everett Road I Albany, NY 12205

Step One - Tell Us About Yourself

Your Name:		
Mailing Address:		
Main Phone Number:	Secondary Phone Number:	
Email Address:		
Please check the appropriate box(es) and add information	as needed.	
I am a student . School:	Graduation Year:	
I am an educator . School:	Position:	
I am a CNLP. Employer:	CNLP ID #	
☐ I am a retiree .		
Other (Please explain):		

Step Two - Choose Your Membership and Support Level

1. Membership	
Affiliate Member (\$50)	
☐ Student Member (\$0)	
	Enter Dues Amount Here \$
2. Additional Support Opportunities	
☐ I wish to make a tax-deductible donation the future of NYSNLA and its educational	of \$ to the NYS Nurserymen's Foundation to support programming.
· · · · · · · · · · · · · · · · · · ·	a gift of \$100 in addition to my dues to demonstrate my support for recognized on NYSNLA.com, in NYSNLA publications and in the er.
	Enter Additional Support Total \$
Add totals for items	1 and 2 to determine your Total Amount Due \$
Step Three - Choose Your Payment N	lethod
My credit card info is below. Charge my card for the to	al amount due. My check payable to NYSNLA is enclose
Name on Credit Card:	Billing ZIP Code:
Credit Card #:	Exp. Date: CV Code:
Signature:	Date:

Thank you for your support and dedication to the growth and development of our industry!