

## 2008 ANNUAL MEMBERSHIP DUES

Membership is open to all NYS OCFS licensed programs or those programs that have been approved by the local district/county to provide residential or non-residential services to survivors of domestic violence and their children. We thank all of you for your continued support of the Coalition through your membership dues.

Please enclose the 2008 annual dues corresponding to your organizational operating budget.

Domestic Violence Program Membership Levels – Sliding Scale (Please Check Appropriate Box):

- \$150 – Operating Budget less than \$100,000
- \$400 – Operating Budget between \$100,000 and \$500,000
- \$700 – Operating Budget between \$500,000 and \$1,000,000
- \$1000 – Operating Budget over \$1,000,000

To be sure we have your correct and up-to-date information, please complete the following:

Organization: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_

- Please check here if your organization would like to receive an invoice. Indicate billing information below, if different from above.

Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_

Again, thank you for your ongoing support and commitment to ending violence against women. We would be unable to do our work without your dedication. If you have any questions regarding your membership with NYSCADV, please feel free to contact Renee Williams at 518-482-5465.

**Checks should be made payable to NYSCADV.**

**You can also make payment via telephone (MasterCard, Visa and America Express only).**

**Please fax or mail entire form to the NYS Coalition Against Domestic Violence  
at the address below:**

**NYSCADV  
350 New Scotland Avenue  
Albany, New York 12208**