



Membership Application for 2017-18

INDIVIDUAL'S NAME COMPANY ADDRESS FAX# CITY, ST, ZIP EMAIL ADDRESS PHONE (HOME) PHONE (BUSINESS)

Preferred Address: Home Business Preferred Phone: Home Business

Membership Type: Active (\$185.00) Active/Member Loyalty Program (\$150.00) Newly Licensed-Active (See below/\$185.00) Associate (\$100.00) Corporate (\$185.00) Student (Dues Waived)

Method of Payment: Check (payable to NYSSO) Credit Card (please complete section below)

Type of Credit Card: American Express Discover Mastercard Visa Dollar Amount:

Expiration Date: Card #: Signature:

Voluntary Opticians PAC Contribution (Contributions to the NYSSO Political Action Committee)

\$25.00 \$50.00 \$75.00 \$100.00 Other

Membership Year is September 1-August 31.

Mail Application to: NYSSO, PO Box 3523, Schenectady, NY 12303 NYSSO Office: (518) 387-9619 Email: Info@nyssso.org Webpage: www.nyssso.org

To be listed accurately in the NYSSO Membership Directory, please indicate which of the following services are offered by your business:

- Artificial Eyes Contact Lenses Eyeglasses Refractions Available Hearing Aids Low Vision

Please Complete the Following:

Region (see map) Date of Birth: / /

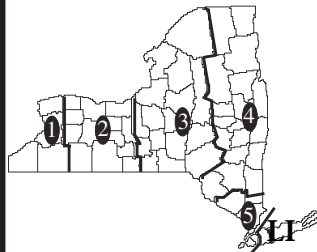
NYS License # Sex: Male Female

Contact Lens Fitter # Signature

Sponsor (if applicable): Date

Please indicate to which organizations you belong:

- American Board of Opticianry Certified (ABO) Fellow, National Academy of Opticianry (FNAO) Opticians Association of America (OAA) National Contact Lens Examiners (NCLE) Contact Lens Society of America (CLSA)



- Region 1 -- Niagara, Erie, Chautauqua, Cattaraugus Region 2 -- Orleans, Monroe, Wayne, Genesee, Wyoming, Livingston, Ontario, Yates, Seneca, Schuyler, Chemung, Steuben, Allegany Region 3 -- St. Lawrence, Jefferson, Lewis, Oswego, Oneida, Herkimer, Cayuga, Onondaga, Madison, Otsego, Chenango, Cortland, Tompkins, Tioga, Broome, Delaware Region 4 -- Clinton, Franklin, Essex, Hamilton, Warren, Saratoga, Washington, Fulton, Montgomery, Schenectady, Schoharie, Albany, Rensselaer, Columbia, Greene, Ulster, Sullivan, Dutchess Region 5 -- Bronx, New York, Queens, Kings, Richmond, Orange, Putnam, Rockland, Westchester Region LI -- Nassau & Suffolk

Membership Categories

ACTIVE MEMBERSHIP -- Annual dues of \$185.00. Any person possessing a valid New York State Ophthalmic Dispensing License is eligible to become an Active Member. (Member Loyalty Program rate of \$150.00; must be renewed by 9/30/18.)

NEWLY LICENSED MEMBERSHIP -- Upon obtaining a NYS License, the optician will receive a complimentary year of membership. the following year, the optician will be invoiced for the rate of \$185.00. Newly licensed opticians who join under the special offer will be entitled to full Active Member benefits.

ASSOCIATE MEMBERSHIP -- Annual dues of \$100.00. Any person who does not qualify for Active membership but is supportive of opticianry shall be eligible to become an Associate Member. Associate Members are entitled to all the rights of an Active Member, except voting and may participate in all activities of this Society, unless specifically excluded by the Board of Directors.

CORPORATE MEMBERSHIP -- Annual dues of \$185.00. Any proprietorship or corporation maintaining 51% of its licensed opticians as members of this Society and upholding the by-Laws and constitution of the Society is eligible to become a Corporate Member. Corporate Members are entitled to all rights of an Active Member, except voting and may participate in all activities of the Society, unless specifically excluded by the Board of Directors.

STUDENT MEMBERSHIP -- Annual dues waived. Any person who is enrolled as a student in a New York State-accredited program for Ophthalmic Dispensing is eligible to become a Student Member. Student Members are entitled to all rights of an Active Member, except voting and may participate in all activities of this Society, unless specifically excluded by the Board of Directors.