



Membership Form

The \$50 payment can be made out to “New York State Network for Youth Success” and mailed to:

New York State Network for Youth Success
991 Broadway, Suite 205
Albany, NY 12204

Membership Status

New

Renewal

Name: _____

Organization/Program: _____

Address: _____

City: _____

Zip Code: _____

Title: _____

E-mail address: _____

Do you have a School-Age Care (SAC) Credential? _____