



## MEMBERSHIP FORM

**For Membership July 1, 2025 through June 30, 2026**

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

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

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

Phone Cell \_\_\_\_\_ Home \_\_\_\_\_ Business \_\_\_\_\_

Email \_\_\_\_\_

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All membership dues are \$25.00 - Please indicate if you are a new member or a continuing member:

New Member: \$ \_\_\_\_\_

Continuing Member: \$ \_\_\_\_\_

**Additional Donation:** \$ \_\_\_\_\_

Total Enclosed \$ \_\_\_\_\_

**Please make checks payable to "NYS Career Development Opportunities Inc." Mail this form with your dues to: Sara Ayala, (CDO Treasurer)  
32 Woodbury Road, New Hartford, NY 13413**