



SOUTHEASTERN ZONE CHAPTER: NYS SBGA • P.O. BOX 273, VALHALLA, NY 10595

**SOUTHEASTERN ZONE CHAPTER**  
**ASSOCIATE MEMBER APPLICATION**

DATE \_\_\_\_\_

Company Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Mailing Address \_\_\_\_\_

Town / City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_

Company Phone Number \_\_\_\_\_

Company Website \_\_\_\_\_

Contact Person's Phone Number \_\_\_\_\_

Contact Person's e-mail \_\_\_\_\_

Please provide a brief description of your company's products and/or services as you want it to appear on our website

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**Please DO NOT send this form to the Albany address. Send to address listed above.**

1. Your company must be a member in good standing with NYS SBGA in Albany before joining the Southeastern Zone Chapter – NYS SBGA.
2. Your company must be a Chapter Member in good standing to attend our monthly Chapter meetings.
3. Annual Chapter fees are \$450.00 (pro-rated) for the period Sept. 1 – August 31 (Cash, check or credit card. Call Tom Briggs 914-447-0255 with credit card info) Make checks payable to: "Southeastern Zone Chapter – NYS SBGA"
4. Chapter Membership will entitle your company to be listed on the Southeastern Zone Chapter website in the "Associate Members" section.
5. All membership applications will be reviewed and approved by Chapter Officers.
6. Completed applications and payment should be returned to the Valhalla address listed above. Please direct any questions to [tbriggs0108@bcSDny.org](mailto:tbriggs0108@bcSDny.org) .