BECOME A MEMBER OF THE NY RURAL WATER ASSOCIATION

Complete this application and return with payment to:

New York Rural Water Association, PO Box 487, Claverack, NY 12513

Phone: 1-888-697-8725

Disclaimer: Dues are not deductible as a charitable contribution.

ompany Contact (Business Only): Title:
state: Zip: County: reet Address (If different than mailing address): one: () Fax: mail Address: Website Address: ontact Person For Water: Title: ontact Person For Wastewater: Title: ontact Person For Wastewater: Title: A customer is defined as one metered or non-metered unit** Membership Rate Structure (effective January 1, 2013) Please circle the correct amount. Water or Wastewater System Water and Wastewater Systems 0 - 50 Customers \$145.00 0 - 50 Customers \$203.00 51 - 250 Customers \$185.00 51 - 250 Customers \$243.00 251 - 500 Customers \$214.00 251 - 500 Customers \$272.00 501 - 1000 Customers \$243.00
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Over 1000 Customers \$272.00 Over 1000 Customers \$386.00
Associate Membership (Business Only) \$290.00
I have englaced a check in the amount of \$
I have enclosed a check in the amount of \$ made payable to New York Rural Water
Card Holder's Name:
Card Holder's Address: City: State: CVV C

Thank you for your support!