



MEMBERSHIP FORM

For Membership July 1, 2020 through June 30, 2021

Name: _____

Address: _____

City: _____ State _____ Zip _____

Phone Cell _____ Home _____ Business _____

Email _____

All membership dues are \$15.00 - 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: Susan Mager, (CDO Treasurer) 3406 McKinley
Parkway, Apt. C-11, Blasdell NY 14219**