



# Membership Application 2012

**Membership period:**

**January 1, 2012 - December 31, 2012**

Name \_\_\_\_\_

Home Address \_\_\_\_\_

*Street*

*City*

*State*

*Zip Code*

Home phone \_\_\_\_\_

School Name \_\_\_\_\_

School Address \_\_\_\_\_

*Street*

*City*

*State*

*Zip Code*

Primary E-mail \_\_\_\_\_ Secondary E-mail \_\_\_\_\_

Languages taught \_\_\_\_\_ Levels taught \_\_\_\_\_

*Is this a gift membership? \_\_\_\_\_ If so, may we say from whom? \_\_\_\_\_*

Please check one:  New Member  Renewing Member  Retiree (No Dues Needed, please send this form nonetheless)  Student

I will gladly help with:  Hosting meetings/conferences at my school  Presenting workshops  Committee  Helping at conferences  Serving on the LECNY Executive Board  Other: \_\_\_\_\_

*Please return this form and a check for \$15.00 payable to LECNY to:*

**Denise Mahns**  
LECNY Membership Manager  
8105 Commandant Way  
Manlius, NY 13104