

## Membership Form

Name:		Membership type	Ethnic Identity:
Address:		O Adults (women 18+) O Associate (men 18+)	O Black/African Amer.
City:State:		O Senior (60+) O Teens (12 -17)	O Hispanic/Latina O American Indian /Alaskan Native
Home Phone:Work	Phone:	0 12-17	O Caucasian/White O Asian/Pacific
E-mail:		O 18-24 O 25-44 O 45-59	Island O Other:Multi Ethnic
Employer:		Cabaal Laval	Family Income:
Birth Date:Notify/Emergency:		011.3./GLD	O Under \$15,000 O \$15,000 - \$29,999 O \$30,000 - \$44,999
Phone:		O College Graduate O Graduate School	O \$45,000 - \$59,999 O \$60,000 - \$74,999 O \$75,000 - \$99,999
The YWCA NENY has permission to use recorded p	photos, videos or audio taken of me or r	ny minor childr	O \$100,000+
Signature:	Date:		