

How to reserve your support opportunity:

 Email contact cassandra.ingham@nyssba.org

 Fax contract to 518-783-3540

NYSSBA's 2021 Support Contract

COMPANY INFORMATION

Contact Person *(The contact person receives all correspondence.)* _____ Date _____

Company _____

Phone _____ Email _____

Address _____

City _____ State _____ Zip _____

SUPPORT OPPORTUNITIES

Please check the opportunity(ies) of your choice.

<input type="checkbox"/> EClips	\$ _____	<input type="checkbox"/> NYSSBA President's Gavel Podcasts	\$ _____
<input type="checkbox"/> New School Board Member Academy	\$ _____	<input type="checkbox"/> District Clerk Workshops	\$ _____
<input type="checkbox"/> NYSSBA eLearning Courses	\$ _____	<input type="checkbox"/> Policy Workshops	\$ _____
<input type="checkbox"/> Summer Law Conference	\$ _____	<input type="checkbox"/> Superintendent Evaluation Workshops	\$ _____
<input type="checkbox"/> The Capital Conference	\$ _____	<input type="checkbox"/> Hot Topics/Emerging Issues Webinars	\$ _____
<input type="checkbox"/> Board Officers Academy	\$ _____		

PAYMENT INFORMATION

Support Cost: \$ _____

- Invoice
 Check (Please make checks payable to NYSSBA and mail with copy of contract to:
NYSSBA, P.O. Box 305, Canajoharie, NY 13317)
 Visa MasterCard American Express Discover

Card Holder's Name _____

Account Number _____ Exp. Date _____

Card Holder's Signature _____ Exp. Date _____