



NYASAP

## COALITION MEMBERSHIP APPLICATION

(October 1, 2018 - September 30, 2019)

New York Association of Alcoholism & Substance Abuse Providers, Inc.

(518) 426-3122 • Fax: (518) 426-1046 • E-mail: [slafountain@asapnys.org](mailto:slafountain@asapnys.org) Website: [www.asapnys.org](http://www.asapnys.org)

SEND APPLICATION FORM AND DUES TO: NYAASAP, 11 North Pearl St., Suite 801, Albany, NY 12207

Applying for a New Membership       Renewing Member

### Coalition Membership:

The ASAP Coalition Membership category is designed for coalitions/networks of substance use disorder and problem gambling services providers whose membership includes **at least fifty percent (50%) member agencies in good standing**. All Coalition Members have a representative on the **ASAP Board of Directors**. All memberships are subject to approval from the **ASAP Membership Committee**.

Coalition Name \_\_\_\_\_

Coalition President/Chair's Name \_\_\_\_\_

Coalition President/Chair's Agency Affiliation \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

E-mail \_\_\_\_\_

Please send Member Information by:  FAX       E-Mail       U.S. Mail

**Membership Dues:** ASAP Coalition Membership dues are \$750 per year.

Enclosed \$ \_\_\_\_\_ Date \_\_\_\_\_

**Method of Payment:**     Check Enclosed payable to ASAP  
 VISA (13-16 digits)     MasterCard (16 digits)     American Express (15 digits)

Name on Card (Print) \_\_\_\_\_ Card Number \_\_\_\_\_

Billing Address \_\_\_\_\_

Exp Date \_\_\_\_\_ Security Code: \_\_\_\_\_ Charge Amount \$ \_\_\_\_\_

Signature \_\_\_\_\_

If the person who will represent your coalition on the ASAP Board of Directors is someone other than the President/Chair listed above, please give the name of the person who will be your Coalition Representative.

Coalition Board Representative Name \_\_\_\_\_

Coalition Board Representative's Agency Affiliation \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

E-Mail \_\_\_\_\_