



**Long Island Village Clerks and
Treasurers Association, Inc.**

LIVCTA.COM

ANNUAL MEMBERSHIP APPLICATION

Complete and return with \$50.00 per member to:

**Checks payable to: Long Island Village Clerks & Treasurers Association
(LIVCTA)**

**c/o Barbara Kelly
361 Main Street
Farmingdale, NY 11735**

Name: _____ Title: _____

Municipality/Company: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

For Member Information only – not to be printed

Home Address:

Home Telephone: _____ Cell Phone: _____

Annual Year is June 1st to May 31st

Note: Membership will be reflected in directory if paid by November 1st