



**NEW YORK STATE  
ASSOCIATION OF HOME INSPECTORS**

THE VOICE OF THE HOME INSPECTION PROFESSION IN THE EMPIRE STATE.

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**NYSAHI MEMBERSHIP APPLICATION**

Member Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_

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

New Member     Renewing Member

**NYSAHI annual dues are \$75.00**

- Check enclosed (payable to **NYSAHI**) or  
 Dues paid by my trade association chapter (chapter name) \_\_\_\_\_  
(All major credit cards are accepted on the paypal portal at [NYSAHI.com](http://NYSAHI.com))

**Mail to:**

**Matt Wynne, Treasurer  
New York State Association of Home Inspectors  
PO Box 62  
Brightwaters NY 11718**

- I would be willing to serve on a NYSAHI Committee (i.e. membership development, fund raising)

**Please completely fill in the contact information, especially the e-mail address. And make sure it is legible! Being able to contact our members quickly is critical.**

**Thank you**