ABOUT US

NPCNYS is a statewide membership organization of community-based, not-for-profit housing companies and other interested parties committed to revitalizing New York State’s urban and suburban areas.

REVITALIZING COMMUNITIES, PRESERVING NEIGHBORHOODS.

126 State Street, Suite 302
Albany, NY 12207

518 432 6757

npcnys.org
The mission of NPCNYS is to unify, educate, empower, and strengthen community organizations in their provision of affordable housing and community revitalization activities.

Our members create positive change in the supply of safe and decent affordable housing, and in revitalization, economic development, and historic preservation activities in neighborhoods struggling with disinvestments, poverty, abandonment, environmental hazards and displacement.

**IDENTIFYING NEEDS, CREATING CAPACITY.**

**ADVOCACY**
Working to ensure adequate resources for our neighborhoods

**SUPPORT**
Providing assistance to increase the capacity of our members

**OPPORTUNITY**
Delivering tailored education, training, and networking events

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**NPCNYS Membership Application**

Organization: __________________________________________________________

Executive Director: ___________________________________________________

Address: ______________________________________________________________

City: ___________________ State: __________ Zip code: __________________

Email: ________________________________________________________________

Website: ______________________________________________________________

**Dues Structure**

<table>
<thead>
<tr>
<th>Annual Dues</th>
<th>Organizational Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>$200.00</td>
<td>$0 - $250,000</td>
</tr>
<tr>
<td>$300.00</td>
<td>$251,000 - $750,000</td>
</tr>
<tr>
<td>$400.00</td>
<td>$751,000 - $999,000</td>
</tr>
<tr>
<td>$550.00</td>
<td>$1,000,000+</td>
</tr>
</tbody>
</table>

**Payment**

- [ ] Visa  - [ ] MasterCard  - [ ] Discover

Please charge $______ (plus $3.00 fee)

Card number: ____________________________

Exp (MM/YY) _________  CVV _________

Billing zip code ______________