# **FRYSCKy Membership Application & Invoice**

FRYSCKy membership period is annually from July 1 – June 30

State Grant Funds May Be Used to Pay Dues!

## Member Benefits

Membership in a professional organization

Support of a major statewide advocacy organization

Representation on public policy issues that impact FRYSC funding

Eligible to vote for regional representation\*

Eligible to serve on FRYSCKy Board of Directors<mark>\*</mark>

Eligible to receive scholarships for state & national trainings\*

Regular communications on legislative issues pertaining to children, youth, & families

Linkages to other national organizations

Discounted registration rate for Fall Institute

Membership Card

\* not available to Associate Members or non-FRYSC staff regardless of membership category

### PAYMENT

Make Checks Payable to: FRYSCKy, Inc. 2220 Nicholasville Rd., Suite 110-333 Lexington, KY 40503

### Federal Tax ID# ~ 61-1227454

Please send a copy of this form to your Board office along with your PO and request that they send payment along with a copy of the form to the FRYSCKy address provided above. Please keep a copy of this form for your documentation. If an invoice is needed, you may request one by emailing FRYSCKy.Office@gmail.com

> This form must be included with payment to ensure proper credit.

## Membership Categories & Dues (choose one)

## **OPTION #1 - Center** (*FRYSC Coordinator or Support Staff*) ~ \$60 *annually* For school districts that are paying the fee, the membership remains with the Center,

so if the current coordinator leaves, the new coordinator inherits the existing membership for the remainder of that membership period.

**OPTION #2 - Individual** *(FRYSC Coordinator or Support Staff)* ~ \$60 *annually* For individuals who are writing a personal check for membership. If individual changes jobs during membership period, the membership remains with that person.

**OPTION #3 - Organizational** *(FRYSC Coordinator + Two)* ~ **\$115** *annually* This membership option allows the coordinator plus 2 additional FRYSC staff or school administrators or Advisory Council members from same Center to join.

## **OPTION #4 - Associate ~ \$35** annually

Available for non–FRYSC staff (e.g. Principals, District Contacts, other positions not funded with FRYSC funds); see Member Benefits for details.

## **OPTION #5 - Legacy ~ \$25** annually

Available for retired FRYSC Coordinators or FRYSC Support Staff, who want to maintain a communication linkage to the profession and who want to support the advocacy efforts of the Coalition.

### Amount Due

please write amount that you selected from above.

## Member Information (include info for each member)

Individual Name(s):		
Job Title:		
Center (or Agency) Name:		
Mailing Address:		
City:	_ State:	Zip:
Telephone Number:		
Email Address:		
School District:		
Region Number:		
Regional Program Manager:		

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