

NEW YORK STATE ASSOCIATION OF MAGISTRATES COURT CLERKS, INC.

APPLICATION

nysamcc@nycourts.gov • www.nysamcc.com

PLEASE PRINT CLEARLY

CLERK INFORMATION

First Name: _____ MI: _____ Last Name: _____

Please indicate any name change here: _____

Town/Village of: _____ County _____

NY Courts E-Mail: _____@nycourts.gov

Date you became a Court Clerk: _____ Are you a Judge? Yes No

Annual Salary _____ Case Load _____ Weekly Hours Worked _____

If you are a new Clerk, did you replace an existing Clerk? Yes No

If yes, please indicate the name of the clerk you replaced: _____

COURT INFORMATION *PLEASE MAKE ANY CORRECTIONS NEEDED

Primary Court Name: _____

Court Phone Number: _____ Ext. _____ Court Fax: _____

Primary Court Address: _____

Are you a clerk in more than one Court? Yes No

If yes, please list your other Court(s): _____

Address(s): _____

**ANNUAL MEMBERSHIP DUES
JANUARY-DECEMBER 2024**



ASSOCIATION USE ONLY:

Date Paid: _____

Amount Paid: \$ _____

Check Number: _____

Municipal Check Personal Check

Is check for more than one person?
Yes No

If yes, please list names that are also covered:

DESCRIPTION	PRICE
ANNUAL DUES: JANUARY – DECEMBER 2024 Full Membership Dues \$60.00 Retired Members \$30.00 To pay online: https://www.paylocalgov.com/Payment/SelectEntity/1246 Make Check Payable to: NYSAMCC, Inc. Mail to (PLEASE NOTE NEW ADDRESS): NYSAMCC, Inc Membership Chair P.O. Box 852 Troy, NY 12181 Please return this completed application with your payment in the provided envelope.	\$
For Questions or Information please contact: Membership Chair Kimberly Stahley.....kstahley@nycourts.gov Treasurer.....Lorraine Buchal.....lbuchal@nycourts.gov	
Your New Membership Card will be e-mailed to your nycourts email. Please verify it is correct. If you do not receive your card via email, check your spam. It may be there.	
Payment of dues will be accepted from January 1, 2024 through the “fixing of the record date” – August 31, 2024. Instructions to access the password protected portion of NYSAMCC.com will be forwarded to you with your membership card by email at your nycourts address.	
IF YOUR TOWN OR VILLAGE REQUIRES A VOUCHER, ONE MAY BE PRINTED ON OUR WEBSITE WWW.NYSAMCC.COM	
	TOTAL \$

