

SISTERS IN CRIME
NY/Tri- State Chapter
Dues Renewal Form

The renewal period begins every January. Please fill out your name and date at minimum, adding any other information that's changed, and submit by February 15th.

Name _____

Pseudonym(s) _____

Street Address _____

City _____ State _____ Zip _____

Main Phone _____ Eve./Mobile _____

E-mail _____ Today's Date: ____/____/____

I am a (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Writer | <input type="checkbox"/> Publishing Professional |
| <input type="checkbox"/> Published Crime Writer | <input type="checkbox"/> Agent |
| <input type="checkbox"/> Unpublished Crime Writer | <input type="checkbox"/> Editor |
| <input type="checkbox"/> Screenwriter/Playwright | <input type="checkbox"/> Publicist |
| <input type="checkbox"/> Librarian | <input type="checkbox"/> Reader/Fan |

Other (describe) _____

Please send a check for **\$35.00** by February 15th, made payable to **NYSinC** .
Then mail check with this form in care of our Membership Coordinator:
Peggy Ehrhart, 168 Park Avenue, Leonia, NJ 07605

Please remember also to renew with the National Chapter. Those directions can be found at www.sistersincrime.org For any other questions, contact Peggy Ehrhart at pehrhart@sprynet.com

THANKS FOR RENEWING!