



Empire State Safety Association (ESSA)

2025 MEMBERSHIP INVOICE

Individual, Municipality or Company Name: _____

Address: _____

Contact Person/Primary Member Name: _____

Contact Person/Primary Member Email: _____

Contact Person/Primary Member Phone: _____

This ESSA membership includes multiple employees within the member organization. Please list below additional employees to be added to the email list to receive ESSA information, safety briefs and newsletters.

Name: _____ Email: _____

Name: _____ Email: _____

Name: _____ Email: _____

DUES

The membership dues cover the period of January 1, 2025 to December 31, 2025.
FEIN 84-2725496 W-9 available upon request.

Select ONE:

MUNICIPAL MEMBERSHIP (per municipality)	\$60.00	
NON-MUNICIPAL MEMBER (per company)	\$120.00	

Complete form and pay by credit card online at www.empirestatesafety.com

Please note that a service fee will be charged for credit card payments

Or mail check payable to "ESSA" with this completed form via USPS to:

Melissa Turner, ESSA Treasurer

Oswego County Human Resources Department, 46 East Bridge Street, Oswego, NY 13126

Questions: melissa.turner@oswegocounty.com