New York Dragonfly and Damselfly Survey

Volunteer Registration / Change of Name or Address

To ensure accuracy, please print in capital letters and avoid contact with the edge of the box. Do not use pencil, red ink or felt tip pen. The following will serve as an example:

A	B	C	D	E	F	G	H	I	J	K	L	M
N	O	P	Q	R	S	T	U	V	W	X	Y	Z

A Volunteer ID is required to submit data. Your unique number consists of the first three letters of your last name, the first letter of your first name, and the last four digits of your phone number.

Is this a new registration or a change of name / address? ☐ **New** ☐ **Change**

Volunteer ID (e.g. SMI-J-9431)

___ - ___ - ____

Today's Date: **Month** __ **Year** 2 0 0 __

First Name

M.I.

Last Name

Street Address

Address Cont.

City

State/Province

U.S. Zip Code

Canada Postal Code

Phone Number

___ - ___ - ____

E-mail Address (eg: EMERALDMOCHA@NYDDS . COM)

Please return this form to:
NY Dragonfly and Damselfly Survey, NYSDEC, 625 Broadway, Albany, NY 12233-4757

Thank You!

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