

**MEMBERSHIP APPLICATION**  
Please Print or Type

NAME \_\_\_\_\_  
Last First Middle

Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Suite No. \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Business Telephone ( ) \_\_\_\_\_

Fax No.: ( ) \_\_\_\_\_

E-Mail Address (Please print) \_\_\_\_\_

Law School Attended: \_\_\_\_\_

Year Graduated: \_\_\_\_\_

Admission to NY BAR:

Date: \_\_\_\_\_

Dept.: \_\_\_\_\_

Are you in good standing to practice law in New York State? \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant Date

**ANNUAL MEMBERSHIP DUES CHARGES**

- Student member..... \$ 15.00
- Admitted 1 to 5 years..... \$ 90.00
- Associate member..... \$ 90.00
- Government/Court/Public Service Employee..... \$ 90.00
- Admitted more than 5 years..... \$175.00

**RETURN COMPLETED MEMBERSHIP APPLICATION WITH PAYMENT TO:**

851 Grand Concourse  
Room 124  
Bronx, New York 10451  
718-293-2227