

# SOUTHWEST LOUISIANA BAR ASSOCIATION MEMBERSHIP REGISTRATION FOR 2017

To take advantage of the Southwest Louisiana Bar Association member services, review the following information, make the necessary changes, if any, complete and return this registration together with your membership dues. Mail to Southwest Louisiana Bar Association, P. O. Box 191, Lake Charles, LA 70602-0191.

<u>First Name</u>	<u>Middle Int.</u>	<u>Last Name</u>
<u>Nickname</u>		<u>Date of Birth</u>
<u>Business Name</u>		
<u>Business Address</u>		
<u>Business City</u>	<u>Business State</u>	<u>Business Zip</u>
<u>Business Phone</u>	<u>Business Fax</u>	<u>Home PHone</u>
<u>Home Address</u>		<u>E-Mail</u>
<u>Home City</u>	<u>Home State</u>	<u>Home Zip</u>
<u>Bar Date</u>	<u>Bar Roll</u>	<u>State Prac.</u>
<u>Spouse</u>	<u>Bar Auxiliary</u>	
<u>School</u>	<u>Date</u>	<u>Degree</u>
<u>Law School</u>	<u>Law Date</u>	<u>Law Degree</u>
<u>Bar Offices</u>		
<u>Memberships</u>		
<u>Volunteer</u>		

REGISTRANTS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### SWLBA ANNUAL DUES SCHEDULE (CHECK TYPE OF MEMBERSHIP)

- \_\_\_\_\_ **REGULAR MEMBERSHIP** - Open to all active and nonresident members in good standing in the Louisiana State Bar. ....\$105.00
- \_\_\_\_\_ **PUBLIC SERVICE MEMBERSHIP** - Open to all members in good standing in the Louisiana State Bar who are employed by municipal, parish, state, or federal government and who because of such employment are prohibited from maintaining a private law practice.....\$70.00
- \_\_\_\_\_ **YOUNG LAWYER MEMBERSHIP** - Open to all attorneys who are less than 39 years old or practiced Law for less than 5 years. (Includes Young Lawyer dues of \$20.00)..... \$75.00
- \_\_\_\_\_ **SENIOR MEMBERSHIP** - Open to retired attorneys and judges who are not practicing law. .... - 0 -
- \_\_\_\_\_ **HONORARY MEMBERSHIP** - Open to active judges who are prohibited from practicing law. .... - 0 -
- \_\_\_\_\_ **FAMILY & JUVENILE LAW SECTION MEMBERSHIP**  
(Must be a member in good standing with the SWLBA).....\$25.00
- \_\_\_\_\_ **WORKER'S COMPENSATION SECTION MEMBERSHIP**  
(Must be a member in good standing with the SWLBA).....\$25.00

**IF PAYING BY CREDIT CARD - PLEASE COMPLETE INFORMATION:**

**CREDIT CARD: \_\_\_VISA \_\_\_MASTERCARD**

**CREDIT CARD #: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_**

**AMOUNT PAID: \$ \_\_\_\_\_**

