

Membership Application

Mr. Ms. Hon. Dr.

NAME:

FIRM/COMPANY:

ADDRESS:

CITY, STREET, ZIP:

E-MAIL: (required for all member communication)

ALTERNATE EMAIL:

PRIMARY PHONE: Cell

BIRTH DATE: (MM/DD/YYYY)

GENDER: Male Female Other Identification Prefer Not to Answer

ETHNICITY: African American/Black Asian/Pacific Islander Biracial/Multiracial
 Hispanic/Latino Middle Eastern Native American White Other

PROFESSIONAL INFORMATION:

DATE ADMITTED TO THE MICHIGAN STATE BAR: (MM/DD/YYYY)

MICHIGAN STATE BAR P NUMBER:

LAW SCHOOL ATTENDED:

GRADUATION DATE: (MM/YYYY) expected date, if student

SECOND LAW SCHOOL ATTENDED:

GRADUATION DATE: (MM/YYYY)

PRACTICE SIZE: Solo Practitioner or Attorney Small Firm/Org. (2-10 Attorneys)
 Medium Firm/Org. (11-20 Attorneys) Large Firm/Org (21+ Attorneys)

PRACTICE AREAS:

- | | | | |
|--|--|---|--|
| <input type="radio"/> ADR | <input type="radio"/> Discrimination | <input type="radio"/> Intellectual Property | <input type="radio"/> Probate/Estate Law |
| <input type="radio"/> Business Law | <input type="radio"/> Education Law | <input type="radio"/> International Law | <input type="radio"/> Real Estate Law |
| <input type="radio"/> Consumer Law | <input type="radio"/> Elder Law | <input type="radio"/> Juvenile Law | <input type="radio"/> Securities & Commodities |
| <input type="radio"/> Contracts | <input type="radio"/> Entertainment/Sports | <input type="radio"/> Labor/Employment | <input type="radio"/> Tax Law |
| <input type="radio"/> Criminal Defense | <input type="radio"/> Environmental Law | <input type="radio"/> Landlord/Tenant Law | <input type="radio"/> Traffic |
| <input type="radio"/> Criminal Law | <input type="radio"/> Family Law | <input type="radio"/> Medical Malpractice | <input type="radio"/> Zoning, Planning and Land Use |
| <input type="radio"/> Debtor/Creditor | <input type="radio"/> Health Care | <input type="radio"/> Municipal Law | |
| <input type="radio"/> Disability | <input type="radio"/> Immigration Law | <input type="radio"/> Personal Injury | <input type="radio"/> Other: |

MEMBERSHIP CATEGORY:

ATTORNEY

- Retired from Practicing Law AND 70 Years or Older — FREE**
If you are an attorney working as a facilitator and/or have a mediation practice, then you do not qualify for this category. You must select an attorney category listed below
- Admitted for 10 or more years in Michigan — \$250**
- Admitted for 5-9 years in Michigan — \$220**
- Admitted for 1+ to 4 years in Michigan — \$150**
- Judges, Government Attorney, Academic, Nonprofit — \$100**
- Admitted for 1 year or less in Michigan — FREE**

ASSOCIATE

- Attorney Unlicensed in Michigan — \$75**
Must show proof of license and good standing with the state or country in which you maintain your practice.
- Non-Attorney Legal Professional — \$75**
Paralegal, Legal Administrators, Legal Secretary, Non-Attorney Legal Professionals
- Student — \$25**
To qualify, you must be currently enrolled in an accredited Law School and must provide proof of enrollment.
- Non-Law/Paralegal Student — \$25**
To qualify, you must be currently enrolled in an accredited Paralegal/Legal Assistant Program and must provide

GET INVOLVED:

JOIN A SECTION:

- | | | |
|---|---|--|
| <input type="checkbox"/> Alternative Dispute Resolution | <input type="checkbox"/> Civil Rights | <input type="checkbox"/> Medical Malpractice Defense |
| <input type="checkbox"/> Auto No-Fault | <input type="checkbox"/> Estate Planning | <input type="checkbox"/> Medical Malpractice Plaintiff |
| <input type="checkbox"/> Barristers | <input type="checkbox"/> Fish and Game | <input type="checkbox"/> Probate Litigation |
| <input type="checkbox"/> Business/Commercial Litigation | <input type="checkbox"/> In-House Counsel | <input type="checkbox"/> Work-Life Balance |

VOLUNTEER INTERESTS:

- | | | |
|--|--|---|
| <input type="checkbox"/> Access to Justice | <input type="checkbox"/> Event Volunteer | <input type="checkbox"/> School Partnership Program (Law Day) |
| <input type="checkbox"/> Detroit Legal Services Clinic | <input type="checkbox"/> Judicial Candidate Evaluation | |
| | <input type="checkbox"/> Magazine Writer/Contributor | |

PAYMENT:

Membership Fee: \$ _____

Foundation Contribution: \$35 \$50 \$100 \$500 Other: \$ _____

Total Amount: \$ _____

- Check Enclosed**, payable to the Detroit Bar Association
- Credit Card Payment:** Visa Mastercard American Express

| | | |
|-----------------------------|------------------|-----|
| CREDIT CARD NUMBER | EXPIRATION DATE: | CVV |
| NAME ON CARD: | SIGNATURE: | |
| CREDIT CARD BILLING ADDRESS | | |

RETURN TO: Detroit Bar Association, CAYMC, 2 Woodward Ave., Ste. 1207, Detroit, MI 48226
P: 313-961-6120, ext. 201 F: 313-965-0842 Email: dba@detroitlawyer.org