## SOUTH BROWARD BAR ASSOCIATION, INC. APPLICATION FOR MEMBERSHIP

http://www.SouthBrowardBar.org

Membership is for one calendar year from the date you sign up.

Please check the appropriate bo	x: Renewal New Member Student/First Year Attorney
Name (Please print legibly):	
City, State, Zip•	
Business/Cell Telephone:	Fax:
States and years admitted to pra	ctice law•
	Law School where Juris Doctorate received:
Please indicate your primary areas of practice (no more than three) in numerical order:	
Admiralty  Appellate  Bankruptcy  Collections  Comm. & Corp Litigation  Corporate Formation  Criminal Matters  Entertainment & Sports  Environmental	<ul> <li>ERISA and Employee         Benefits</li></ul>
<b>Check the appropriate box:</b> □ I certify I am a member in good standing of the Florida Bar. □ I certify I am a Law Student.	
I agree to abide by the Articles of Incorporation and the Bylaws of the South Broward Bar Association and all applicable codes of professional responsibility.	
Signature	Date
Attorney Membership dues:	\$75.00 (per calendar year or any portion thereof)
Paralegal / Legal Assistant dues	
Student/First Year Attorney due	Free (per calendar year or any portion thereof)
Please make check payable to: South Broward Bar Association, C/O Kristine M. Johnson,	

Please make check payable to: South Broward Bar Association, C/O Kristine M. Johnson, P.A., 10620 Griffin Road, #106, Cooper City, Florida 33328; (954) 320-4595; <a href="mailto:kmjlaw@prodigy.net">kmjlaw@prodigy.net</a>; or Apply on line at: *southbrowardbar.org*.