

**BROWN COUNTY BAR ASSOCIATION
MEMBERSHIP APPLICATION
Year ending July 31st**

(Information will be used only for Bar related or approved activities)

Name: _____

Email Address: _____

Firm Name: _____

Firm Address: _____

P.O. Box: _____

City: _____ State: _____ Zip: _____

Office Phone #: (____) _____ Office Fax #: (____) _____

Home Address: _____

Beginning this year, the Hearsay Exception and all other Brown County Bar Association notices will be sent via email, unless we are advised of a preference for receipt of notices via U.S. mail.

_____ **Please check here if you would prefer to receive all Brown County Bar Association notices by U.S. mail.**

Young Lawyers Division (YLD): Have you been practicing less than five years?

____ Yes ____ No

If yes, list first year of admission to the Bar: _____

Annual Membership Dues\$50.00*

(\$10.00 of the \$50.00 annual dues is contributed to the Trowbridge Scholarship Fund)

* Dues increase to \$75.00 if not paid on or before November 15, 2009

Senior/Retired Members Dues (for Members 65 and older).....\$25.00

Additional Contribution to Trowbridge Scholarship Fund....._____

Total Amount Enclosed.....\$_____

Please make checks payable to: *Brown County Bar Association*

Send remittance and application to the person presently serving as Treasurer of the Brown County Bar Association.

NOTE: If you are aware of any new or established attorneys who have relocated to Brown County and wish to become a member of the Brown County Bar Association, please provide a copy of this form to that attorney. Attorneys who return the application along with their dues become active members of the Brown County Bar Association for this Membership Year. Please indicate below the name of any attorney who has left your firm and relocated outside of Brown County.
