

**ARLINGTON BAR ASSOCIATION**  
Membership Application/Annual Dues Statement

**NAME:** \_\_\_\_\_ **TEXAS BAR NO.** \_\_\_\_\_

**FIRM NAME:** \_\_\_\_\_

**OFFICE ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

**LAW SCHOOL:** \_\_\_\_\_ **YEAR OF GRADUATION:** \_\_\_\_\_

**FIELDS OF PRACTICE:** \_\_\_\_\_

**BOARD CERTIFICATION(S):** \_\_\_\_\_

**ARE YOU A MEMBER OF THE ARLINGTON YOUNG LAWYERS ASSOCIATION?** \_\_\_\_\_

**ARE YOU A CURRENTLY ENROLLED LAW STUDENT?** \_\_\_\_\_

**SIGNATURE OF APPLICANT:** \_\_\_\_\_

By signing above, the applicant hereby certifies and represents applicant's compliance with the eligibility requirements of Section 2.01 of the Amended Bylaws of Arlington Bar Association, as set forth below:

*Any attorney whose practice or residence is in the Arlington area, being a member in good standing of the State Bar of Texas, may become a member of this Corporation upon annual submittal of a Membership Application/Annual Dues Statement and payment of dues. "Arlington area" is defined as Arlington, Mansfield, Pantego and Dalworthington Gardens. Notwithstanding the above eligibility requirements, the Board of Directors or a majority of members can extend membership to an attorney or judge who has previously been a member and who has made a substantial contribution to the Arlington Bar Association.*

"I KNOW THAT THE ARLINGTON BAR ASSOCIATION DOES NOT PROTECT THE CONFIDENTIALITY OF ANY E-MAIL ADDRESS I PROVIDE TO THE ASSOCIATION AND IT WILL BE SHARED WITH OTHERS IN THE ASSOCIATION. I AGREE THAT ANY E-MAIL ADDRESSES OF OTHER MEMBERS PROVIDED TO ME BY THE ASSOCIATION WILL NOT BE USED BY ME FOR POLITICAL OR COMMERCIAL PURPOSES OR PROVIDED TO OTHERS FOR SUCH PURPOSES WITHOUT THE PERMISSION OF THE HOLDER OF THE E-MAIL ADDRESS."

**PLEASE ENCLOSE CHECK PAYABLE TO ARLINGTON BAR ASSOCIATION:**

**\$75.00 FOR FIRST-TIME MEMBERS**  
**\$85.00 FOR RENEWAL BY MARCH 31<sup>st</sup>**  
**\$105.00 FOR RENEWAL AFTER MARCH 31<sup>st</sup>**

**VOLUNTARY CONTRIBUTION:** \_\_\_\_\_

PLEASE COMPLETE AND MAIL THIS PAGE AND YOUR CHECK TO:  
**ARLINGTON BAR ASSOCIATION**  
P.O. BOX 882  
ARLINGTON, TEXAS 76004



FOR OFFICE USE:

CHECK NO. \_\_\_\_\_ AMOUNT \_\_\_\_\_ DATE RECEIVED \_\_\_\_\_