



DuPAGE COUNTY BAR ASSOCIATION

Incorporated In 1879

126 South County Farm Rd., Wheaton, Illinois 60187-4597 Phone: (630) 653-7779 - Fax: (630) 653-7870

<http://www.dcba.org>

ARDC # (required): _____

NAME: _____ Birth date: _____ Gender: _____
Please type or print

Address: **Business:** Firm: _____ Telephone: _____

Suite # _____ Street Address: _____ Fax: _____

P.O. Box: _____ City/State: _____ Zip: _____ -- _____

Residence: _____ Telephone: _____

City/State/Zip _____

Email Address: _____ Mailings should go to: Business _____ Home: _____
See Reverse

Business Website Address: _____

Education: College: _____

Degree Received: _____ Date (Mo/Year) : _____

Law School: _____

Degree Received: _____ Date (Mo/Year) : _____

Date (Mo/Year) Admitted: Illinois _____ Other State: _____ Fed: _____ Concentration: _____

State(s) in which I am currently licensed to practice (Other than Illinois) : _____

Former Employment (last 5 years): _____

Membership in Professional Organizations: _____

Foreign Languages Spoken: _____

I, _____, hereby apply for _____ Regular membership in the DuPage County Bar Association, and if elected, agree to abide by its laws, rules and regulations. By my signature, I authorize the DCBA to send information to me by fax if necessary.

Date: _____ Signature _____

Please check here if you have been a member of the DCBA in the past _____

Contributions or gifts to the DuPage County Bar Association are not deductible as charitable contributions for federal income tax purposes. However, dues payments may be deductible by members as ordinary and necessary business expense.

Dues payment must accompany this application. See the attached rate schedule for applicable dues amount.



Go Green with the DCBA: The monthly newsletter and DCBA Brief magazine are both available in electronic formats. Check here if you wish to receive electronic versions **ONLY**:

_____ e-Newsletter only (no hardcopy) * _____ e-Brief (no hardcopy) Email address required.

\$ _____ Ck # _____ Charge: _____ Dues Posted: _____ Computer: _____ Flyers: _____ Cert _____ Em _____

Please indicate your preference for the Committees on which you wish to serve (MAXIMUM OF 6) in the order of your interest (1, 2, 3, etc.) NOTE: Committee designation means that you will be notified of all meetings scheduled for that committee by email or fax. While all DCBA members are welcome at committee meetings, those indicating a committee preference are assumed to have sufficient interest to attend meetings.

- | | |
|---|--|
| <input type="checkbox"/> Alternative Dispute Resolution | <input type="checkbox"/> Judiciary** |
| <input type="checkbox"/> Animal Law* | <input type="checkbox"/> Labor & Employment Law |
| <input type="checkbox"/> Appellate Law & Practice | <input type="checkbox"/> Law Day |
| <input type="checkbox"/> Bankruptcy Law & Practice | <input type="checkbox"/> Law in Literature* (Book Discussion) |
| <input type="checkbox"/> Business Law & Practice | <input type="checkbox"/> Law Practice Management |
| <input type="checkbox"/> Childrens' Advocacy | <input type="checkbox"/> Lawyer Referral Service Oversight** |
| <input type="checkbox"/> Civil Law & Practice | <input type="checkbox"/> Lawyers Lend a Hand* (Non-Legal Volunteering) |
| <input type="checkbox"/> Court Facilities & Library | <input type="checkbox"/> Legal Aid (Oversight committee) |
| <input type="checkbox"/> Criminal Law & Practice | <input type="checkbox"/> Local Government |
| <input type="checkbox"/> Diversity | <input type="checkbox"/> Media (DCBA Cable Programs) |
| <input type="checkbox"/> Elder Law | <input type="checkbox"/> Membership |
| <input type="checkbox"/> Entertainment (DCBA Social Event Planning) | <input type="checkbox"/> Military Law* |
| <input type="checkbox"/> Environmental Law* | <input type="checkbox"/> New Lawyers |
| <input type="checkbox"/> Estate Planning & Probate | <input type="checkbox"/> Paralegals* |
| <input type="checkbox"/> Family Law & Practice | <input type="checkbox"/> Professional Responsibility |
| <input type="checkbox"/> Health Care Law | <input type="checkbox"/> Publication Board** |
| <input type="checkbox"/> Immigration Law* | <input type="checkbox"/> Real Estate Law & Practice |
| <input type="checkbox"/> In-House Counsel* | <input type="checkbox"/> School Law* |
| <input type="checkbox"/> Intellectual Property | <input type="checkbox"/> Tax Law & Practice |

* Indicates an ad hoc committee

** Membership subject to Chair/Board appointment

PLEASE NOTE: Committee notices are sent out by email or fax number, with email given preference. If you have an email address, but prefer to have notices sent to your fax number, please check here. Fax notices only: _____

* _____ Use email for DCBA notices _____ Do NOT publish email address _____ Email address may be published in DCBA member directory. Note: We cannot both email and fax. Only one email address can be used.

Please describe in short, narrative form any special areas of your interest or experience in order that the President may capitalize on your expertise or interest. (e.g., photography, journalism, public speaking, finance, art, choreography, musical instruments, etc.)

Please charge my Credit Card for \$ _____ Account # _____ Exp. Date: _____

Security Code: _____ Signed: _____

Credit Card billing address is my _____ Business or _____ Home Address.

Complete and forward to:

DUPAGE COUNTY BAR ASSOCIATION, 126 South County Farm Rd., Wheaton, Illinois 60187-4597

or Fax with credit card information: (630) 653-7870

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