



Membership Application: August 2009-2010

PERSONAL INFORMATION

Please check if you wish to
exclude from web Directory

Name:	<hr/>	<input type="checkbox"/>
Employer (or School):	<hr/>	<input type="checkbox"/>
Address:	<hr/> <hr/>	<input type="checkbox"/>
Telephone:	<hr/>	<input type="checkbox"/>
Facsimile:	<hr/>	<input type="checkbox"/>
Email Address:	<hr/>	<input type="checkbox"/>

Practice description for use on GHBA Website (please limit to 100 characters; we reserve the right to edit before publication):

DUES

Regular Membership- Practicing Attorney in Private Practice or In-House.....	Postmarked By 12/01/09 Postmarked After 12/01/09	\$50x ____ \$65x ____
Practicing Attorney in Public Interest, And Judges.....	Postmarked By 12/01/09 Postmarked After 12/01/09	\$35x ____ \$50x ____
Associate Membership- Non-attorney Professional.....	Postmarked By 12/01/09 Postmarked After 12/01/09	\$50x ____ \$65x ____
Associate Student Membership.....	Postmarked By 01/01/09 Postmarked After 12/01/09	FREE (with copy of current student ID) \$20x ____
Total dues enclosed:		\$ ____

PLEASE MAKE CHECKS PAYABLE TO: Georgia Hispanic Bar Association, Inc.

Mail complete application form and check to:
Georgia Hispanic Bar Association
PO BOX 191112
Atlanta, GA 31119-1112