

ST. JOHNS COUNTY BAR ASSOCIATION

MEMBERSHIP APPLICATION

Please submit this form with a check payable to St. Johns County Bar Association, and mail to St. Johns County Bar Association, P.O. Box 211, St. Augustine, FL 32085-0211

I hereby apply for membership in the St. Johns County Bar Association as an:

___ Association Member –
“Any member in good standing of The Florida Bar interested in the purposes of this Association.”

___ Affiliate Member –
“Any person who practices as a professional dealing with legal professionals. Such persons may include, but are not limited to, engineers, biologists, planners, architects, realtors, builders, geologists, chemists, ecologists, meteorologists, authorized house counsel, accountants, and law students enrolled at an ABA-accredited Florida law school. Additionally, any attorney who is not a member of The Florida Bar is eligible to apply to be an affiliate.”

Dues Structure:
01/01/2011-12/31/2011
Dues: \$60.00

Full Legal Name: _____

Name as you wish it to appear on the Association records:

Firm: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

Undergraduate: _____

Degree: _____

Law School: _____

Florida Bar Number: _____ Date Admitted: _____

Other State Bar Association Memberships:

Board Certifications held:

Signature: _____

Name: _____

Date: _____