



2014-2015 Application

This application is being furnished as an opportunity for you to join the D.W. Perkins Bar Association, Inc. or renew your membership. The Association's membership year is from July 1 through June 30. **Please Type or Print**

Name _____
Title: Ms./Mrs./Mr. _____ Florida Bar No.: _____
Date of Florida Bar Admission: _____
Other Bar Admissions and Date of Admission: _____
Law School/Year of Graduation: _____
Employer, Firm or Court: _____
Position: _____
Office Mailing Address: _____
City: _____ State: _____ Zip: _____
Office Telephone: _____ Office Facsimile: _____
Office E-Mail Address: _____
Personal E-Mail Address (Optional): _____
Area(s) of Practice: _____

Please check one: New Member Renewal

Annual Dues (Please check one)

- Admitted to practice more than five (5) years - \$125.00
- Admitted to practice five (5) years or less - \$100.00
- Associate Membership - \$75.00
- Student Membership - Free

I will sponsor a first-year practicing attorney by paying \$100.00 additional in dues.

Would you consider mentoring an Attorney or Law school student? (Please check one.)

YES, Attorney _____ Law School Student _____ Both _____

Will you participate in or chair one of the following committees?

- Membership Scholarship Banquet Media/Publicity Newsletter
- Mock trial Judicial Reception Directory Financial Sponsorship
- Community Service Holiday Social/Benefit Case Law Updates CLE
- Restoration of Civil Rights Rules/Elections/Bylaws Website History

Signature: _____ Date: _____

Please return this application and your dues payment in the appropriate amount to:

D.W. Perkins Bar Association, Inc.
P.O. Box 2156
Jacksonville FL 32203-2156