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## **New Member Application**

Please fill out this form in its entirety and and send to Member Services by e-mail memberservices@isba.org, fax 217.525.0420, mail: Illinois State Bar Association, c/o Member Services, 424 S. Second St., Springfield, IL 62701-1779. Or fill it out online at **isba.org/membership/join** 

			☐ Hor	ne Address 🛭	☐ Business Address
M D F D					
Name	Maiden Name (if applicable)				
Company (if applicable)					
Street Address					
City		State	Zi	p	
Tel. No	FAX No		Date of Bir	th	
E-Mail Address		Law School			
Date admitted to IL bar	ARDC#				
Earliest year admitted in	any stateSta	te			
I hereby certify that I am a member of the legal profession licensed to practice and agree, if accepted as a member, to abide by the charter and the bylaws of the Illinois State Bar Association.			Primary Reason for Joining  ☐ ISBA Mutual Professional Liability Insurance ☐ Free CLE ☐ E-Clips		
			☐ Fastcase☐ Networking	☐ IllinoisBa	
Please Remit Pay	ment with Application				
☐ Check	□ MC □ VISA □ AME	< □ DISC			
Check No.	Account No		Expiration Date:		
Help Us Serve You Bette  1. Which of the following best describes your employment status?  Solo Staff Attorney Government Attorney Other (please specify)			2. Including yourself, how many lawyers are in your firm?		
<ul><li>□ Partner</li><li>□ In-house Counsel</li><li>□ Of Counsel</li></ul>	<ul><li>□ Contract Attorney</li><li>□ Public Interest Attorney</li><li>□ Retired</li></ul>		_	□ 21-50 □ 51-150	□ N/A
3. Which of the following	g <b>areas of law</b> makeup a <b>significan</b>	t part of your practice?			
□ Administrative Law □ ADR/Mediation □ Animal Law □ Appellate Practice □ Banking □ Bankruptcy □ Business Law □ Civil Rights □ Collections □ Construction Law □ Consumer Law	☐ Criminal/DUI/Traffic☐ Education☐ Elder Law☐ Environmental Law☐ Estate Planning/Proba☐ Family Law☐ Foreclosures☐ General Practice☐ Health Care	□ Education □ International L □ Elder Law □ Juvenile Law □ Environmental Law □ Labor and Em □ Estate Planning/Probate □ Litigation/Civi □ Family Law □ Local Gov't/M □ Foreclosures □ Medical Malpra □ General Practice □ Mental Health		□ Public Utilitic □ Real Estate □ Social Securi □ Taxation (Fe □ Veterans/Mil □ Workers' Col □ Other (Please	d/State/Local) itary mp

## **Membership Categories**

- **1. Regular**—Members of the legal profession licensed to practice
- **2. Nonresident**—Lawyers in good standing who neither reside nor practice in the State of Illinois.
- **3. Retired**—Members for at least five continuous years who are also in retired status with the Attorney Registration & Disciplinary Commission.
- **4. Inactive**—Members for at least two consecutive years who are also in inactive status with the Attorney Registration & Disciplinary Commission.
- **5. Life**—Any member of the Association who makes a lump sum dues payment of \$9,100.

Dues Reduction/Waiver—available upon approval of written application.

Membership is not cancelled automatically with nonpayment of dues. Upon satisfying all obligations due the Association, resignation must be submitted in writing either by mail or email (memberservices@isba.org)

## **Membership Dues Rates**

Actice Member	Annual
1st year after admission to the Bar in <b>Illinois</b>	Complimentary
2nd and 3rd year after admission to <b>any</b> Bar	\$75.00
4th and 5th year after admission to <b>any</b> Bar	\$150.00
6th, 7th, and 8th year after admission to <b>any</b> Bar	\$240.00
9th and 10th year after admission to <b>any</b> Bar	\$300.00
11+ years after admission to <b>any</b> Bar	\$455.00
Retired Member*	\$60.00
Inactive Member*	\$55.00
Associate Member	\$120.00
Nonresident	\$120.00

\*Retired/Inactive status requires Retired/Inactive Status with ARDC.