

# EL DORADO COUNTY BAR ASSOCIATION

2010 Membership Application ( February 1, 2010 to January 31, 2011)

Please mail your dues and application to: El Dorado County Bar Association, 550 Main Street, Suite A, Placerville, CA 95667  
Questions, please call Executive Director Kathleen Bailey at 530-626-4906.

*The benefits you receive from membership in the EDCBA are:  
local MCLE classes, networking at monthly meetings, mentoring of new attorneys,  
and assistance in marketing your law practice.*

## Attorney Membership Dues: \$90

I am an attorney.

My CA Bar Number is \_\_\_\_\_

Month/Year Admitted (CA) \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name of Firm

\_\_\_\_\_  
Street Address (include mailing address, if different)

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Website Address

\_\_\_\_\_  
Your Assistant's Name and Optional Email Address

\_\_\_\_\_  
Your Areas of Practice:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your Complimentary Associate Membership for  
One Legal Professional in Your Office or Firm  
(One per law office or law firm/Not per attorney in law office or  
firm)

\_\_\_\_\_  
Name of Legal Professional

**REQUIRED:** I hereby certify that the information  
in this form is correct and that I am a member in good  
standing of the State Bar Association of the state  
listed at the top of this form. I authorize the El  
Dorado County Bar Association to make public the  
information provided on this form and relieve the  
Association, its directors, officers, and members of  
any liability resulting therefrom.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date:

## Associate Memberships:

\$10 Member, El Dorado County Legal Professionals  
Association working for an EDCBA Attorney Member

\$20 Member of the  
El Dorado County Legal Professionals Association

\$45 Others in the Legal Community (Non- attorneys)  
Paralegal, Legal Assistant/Secretary,  
Other Legal Office Staff, Non-Legal Professional

\$10 Students with Student I.D.

I am not an attorney.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name of Attorney/Law Office/Law Firm You Work For

\_\_\_\_\_  
Your Mailing Address You Wish Us To Use

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Office Phone Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Your Email Address (to receive notices of our meetings)

## FOR ALL APPLICANTS:

I understand my membership information will be placed  
on the Bar's website [www.eldoradocountyattorneys.org](http://www.eldoradocountyattorneys.org)  
and in our printed roster.

I DO NOT want my name and information publicized.

Include all my information but not my email address

I would like to contribute to the EDCBA's two \$500  
high school graduate scholarships (tax deductible)

\$100  \$50  \$40  \$30  \$25  Other \$ \_\_\_\_\_

*Please write separate check payable to:*  
*El Dorado County Community Foundation*  
Enclosed is my Check # \_\_\_\_\_

## FOR ATTORNEYS:

I would like to donate \$5 towards this Bar Section to  
help cover costs incurred during this year (include in your  
check for dues).  Family Law  Probate  Criminal