



# SUFFOLK COUNTY WOMEN'S BAR ASSOCIATION

A Chapter of the Women's Bar Association of the State of New York

[www.suffolkwomensbar.org](http://www.suffolkwomensbar.org)

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[https://solutionsplusonline.formstack.com/forms/wbasny\\_membership\\_application](https://solutionsplusonline.formstack.com/forms/wbasny_membership_application)

## 2023-2024 MEMBER APPLICATION FORM

PLEASE CHECK ONE:  New Member  Renewal

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Firm Name: (Mandatory) \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: (Check One) \_\_\_\_\_ Home \_\_\_\_\_ Business | Directory Listing: \_\_\_\_\_ Home \_\_\_\_\_ Business

Business Phone: ( ) \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_

Facsimile: ( ) \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Law School: \_\_\_\_\_ Degree: \_\_\_\_\_ Last Year Renewed: \_\_\_\_\_

Bar Admission Dates: \_\_\_\_\_

<b>DUES SCHEDULE - PLEASE CHECK BOX THAT APPLIES:</b>		
<input type="checkbox"/> I	<b>Admitted Less than One Year</b>	\$60.00
<input type="checkbox"/> I(a).	<b>Admitted 5 years or more</b>	\$110.00
<input type="checkbox"/> I(b).	<b>Admitted less than 5 years</b>	\$85.00
<input type="checkbox"/> I(c).	<b>Sustaining Member (Voluntary)*</b>	\$160.00
<input type="checkbox"/> I(d).	<b>Member of the Judiciary (current or retired)</b>	\$60.00
<input type="checkbox"/> I(e).	<b>Public Service (not-for-profit, academia or government)</b>	\$85.00
<input type="checkbox"/> II.	<b>Admitted to another State Bar (not NY)</b>	\$50.00
<input type="checkbox"/> III.	<b>Law School Graduate Awaiting Admission</b>	\$60.00
<input type="checkbox"/> IV.	<b>Law School Student</b>	(Free) \$0.00
<input type="checkbox"/> V.	<b>Paid Member of Another Chapter</b>	\$50.00

\* A Sustaining member is one who in addition to paying the required dues, donates \$50.00 or more to SCWBA.

### Areas of Concentration (Check up to 5):

<input type="checkbox"/> Adoption	<input type="checkbox"/> Discrimination/Civil Rights	<input type="checkbox"/> Insurance	<input type="checkbox"/> Mediation
<input type="checkbox"/> Advertising	<input type="checkbox"/> Disability	<input type="checkbox"/> Intellectual Property	<input type="checkbox"/> Municipal/Planning/Zoning
<input type="checkbox"/> Administrative	<input type="checkbox"/> Domestic Violence	<input type="checkbox"/> (Copyright/Trademark)	<input type="checkbox"/> Native American
<input type="checkbox"/> Admiralty	<input type="checkbox"/> Elder/Guardian/Medical	<input type="checkbox"/> International	<input type="checkbox"/> Not-For-Profit Corporations
<input type="checkbox"/> ADR	<input type="checkbox"/> Education	<input type="checkbox"/> Judiciary	<input type="checkbox"/> Occupational Safety
<input type="checkbox"/> Antitrust & Trade Regulation	<input type="checkbox"/> Employee	<input type="checkbox"/> Labor	<input type="checkbox"/> Patent
<input type="checkbox"/> Appellate Practice	<input type="checkbox"/> Benefits,Pensions/ERISA	<input type="checkbox"/> Land Use/Zoning	<input type="checkbox"/> Public Interest
<input type="checkbox"/> Banking/Bonds	<input type="checkbox"/> Employment	<input type="checkbox"/> Landlord/Tenant	<input type="checkbox"/> Real Estate
<input type="checkbox"/> Bankruptcy	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Legislation	<input type="checkbox"/> Regulatory Compliance
<input type="checkbox"/> Collections	<input type="checkbox"/> Environmental	<input type="checkbox"/> Litigation (Civil/Commercial)	<input type="checkbox"/> Securities
<input type="checkbox"/> Communications	<input type="checkbox"/> Ethics/Attorney Discipline	<input type="checkbox"/> Litigation (Legal Malpractice)	<input type="checkbox"/> Social Security/Medicare
<input type="checkbox"/> Condemnation/Certiorari	<input type="checkbox"/> Family	<input type="checkbox"/> Litigation (Medical Malpractice)	<input type="checkbox"/> Tax
<input type="checkbox"/> Constitutional	<input type="checkbox"/> Federal Practice	<input type="checkbox"/> Litigation (Negligence/ Torts/Products Liability)	<input type="checkbox"/> Unemployment Compensation
<input type="checkbox"/> Corporate/Commercial	<input type="checkbox"/> General Practice	<input type="checkbox"/> Litigation (Personal Liability)	<input type="checkbox"/> Utilities
<input type="checkbox"/> Creditor's Rights	<input type="checkbox"/> Government	<input type="checkbox"/> Matrimonial	<input type="checkbox"/> Wills/Trusts/Estates
<input type="checkbox"/> Criminal	<input type="checkbox"/> Health		<input type="checkbox"/> Workers' Compensation
	<input type="checkbox"/> Immigration		

The applicant affirms that she/he is a member in good standing of the Bar of the State of New York or of the State of \_\_\_\_\_ or that she/he is a student in good standing at the law school set forth above or a recent law school graduate awaiting admission to the Bar.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please return this application with your check made payable to: SCWBA and mail to PO Box 735 Islip Terrace NY 11752