

# N.S.B.C.B.A. MEMBERSHIP

## Application / Renewal / Information Change

Website: [www.NSBBAR.org](http://www.NSBBAR.org)



Date:

First Name:

Middle Name:

Last Name:

Check here if membership information is the same as last year. If checked, the rest of the form may be left blank.

Law Firm / Agency:

Office Address:

City:

State:

Zip Code:

Office Telephone:

Fax Number:

Other Contact Number:

Preferred Mailing Address:

City:

State:

Zip Code:

Office E-mail:

Website:

State Bar Number:

Year Admitted:

Law School:

Graduation Year:

Areas of Practice:

Check this box if you do **NOT** want your name, address and e-mail disclosed to purchasers of Bar Association mailing labels.

New Application

Renewal Application

Information Change

MEMBERSHIP FOR JULY 1, 2017 THROUGH JUNE 30, 2018:

New Admitee - FREE first year of practice

One year Membership - \$80 \*

Two year Membership- \$150 \*

\* Includes listing in the online membership directory at [www.NSBBAR.org](http://www.NSBBAR.org), a link to your website and your photograph (if provided in .jpg format).

Send the completed form and your membership check made payable to N.S.B.C.B.A. to  
N.S.B.C.B.A.  
P.O. Box 6082  
Santa Maria, CA 93456

Questions? Contact us at [NSBCBA@GMail.com](mailto:NSBCBA@GMail.com)

### ASSOCIATION USE ONLY

Treasurer: \_\_\_\_\_ Webmaster: \_\_\_\_\_ Roster: \_\_\_\_\_ Updated E-mail List: \_\_\_\_\_