

MEMBERSHIP APPLICATION DUE ON OR BEFORE JANUARY 31

Name & Ti	tle:		
Employer:			
Managing Partner:			
Work Address:			
Work Website:			
Work Phone:			
Work Email:			
Home Address:			
Cell Phone:			
Home Email:			
ALA Member ID#:			
Selection	Tymo	Dung	Membership Levels Description
	Type	Dues	Description Description
	Regular	\$150	Regular Members, includes lunches at all meetings.
	Nonprofit	\$75	Members who work for a government or non-profit organization.
	Associate	\$150	Don't qualify for Regular membership, includes lunches at all meetings, but
			cannot hold a position on the Board.
	Student	\$50	Don't qualify for Regular or Associate membership, must be currently enrolled
			or within 6 months of graduation from an eligible educational institute.
Serve on the Board ofHelp with special prParticipate in CLM of			ts Have a mentor assigned to me for 6 months
Statements	and Underst	anding	
I understand Administrate individual.	d that a prerors ("ALA"). Additionally,	equisite I also Jax ALA	for Jax ALA Membership is membership in the international Association of Legal understand that Jax ALA membership is personal and cannot be transferred to another members receive notices of Chapter activities by email. By providing your email address dge your acceptance to receive email communications from the Jax ALA.
www.alanet	.org) and that	I qualify	he membership requirements as set forth in ALA's Bylaws (review the Bylaws online at y for membership in, am a member of, or am in the process of becoming an ALA Member. bide by the ALA Code of Professional Ethics (review the Code online at www.alanet.org).
Photograph	ic Release		
I hereby gra and/or mark other public against any	nt the ALA a eting purpose ations. I agre possible liabil A and its offic	es, which e to hol lity resul	ALA the right to use, edit, publish and/or display my photograph/image for promotional h may include, but not be limited to, use in brochures, ALA and Jax ALA website, and d the ALA and Jax ALA and its shareholders, employees, agents and assigns harmless lting from the use of said photographs/image and I hereby release and discharge the ALA bloyees, agents and assigns from any claims whatsoever in connection with the use of such
Signature:			
(If this form i	s sent electroni	ically, yo	ur name printed on this line will be deemed to be, and will be accepted as your signature.)

Checks are payable to Jax ALA, Tax ID 59-2395852

Please submit application and payment to: Lisa Murphy, Taylor Stewart Houston & Duss, P.A. 1050 Riverside Ave., Jacksonville, FL 32204 lmurphy@tshd-law.com (904) 354-9000 x. 237