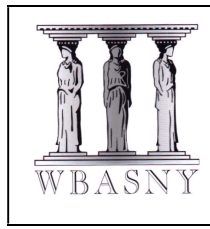


Women's Bar

OF THE STATE



Association

OF NEW YORK

MEMBERSHIP APPLICATION

Name: _____

Firm or Business Affiliation: _____

Street Address: _____

City/Town: _____ **County:** _____ **Zip Code:** _____

Telephone: _____ **FAX:** _____ **E-mail:** _____

Chapter: (Please check one chapter and select a membership category from the chapter dues schedule on the reverse side of this application)

- | | | | | |
|---|---|--|--|---|
| <input type="checkbox"/> Adirondack | <input type="checkbox"/> Central New York | <input type="checkbox"/> Mid-York | <input type="checkbox"/> Queens | <input type="checkbox"/> Suffolk |
| <input type="checkbox"/> Bronx | <input type="checkbox"/> Del-Chen-O | <input type="checkbox"/> Nassau | <input type="checkbox"/> Rochester | <input type="checkbox"/> Thousand Islands |
| <input type="checkbox"/> Brooklyn | <input type="checkbox"/> Finger Lakes | <input type="checkbox"/> New York | <input type="checkbox"/> Rockland | <input type="checkbox"/> Westchester |
| <input type="checkbox"/> Capital District | <input type="checkbox"/> Mid-Hudson | <input type="checkbox"/> Orange-Sullivan | <input type="checkbox"/> Staten Island | <input type="checkbox"/> Western New York |
| <input type="checkbox"/> At-Large Membership * For lawyers practicing outside of the geographic area of an existing chapter | | | | |

Area of Concentration: (Select five or less)

- | | | |
|---|--|---|
| <input type="checkbox"/> Academia/Legal Education | <input type="checkbox"/> Employee Benefits/ERISA | <input type="checkbox"/> Litigation (Civil/Commercial) |
| <input type="checkbox"/> Administrative Law/Regulatory | <input type="checkbox"/> Entertainment | <input type="checkbox"/> Litigation (Legal Malpractice) |
| <input type="checkbox"/> Admiralty | <input type="checkbox"/> Environmental | <input type="checkbox"/> Litigation (Medical Malpractice) |
| <input type="checkbox"/> Adoption | <input type="checkbox"/> Ethics/Attorney Discipline | <input type="checkbox"/> Litigation (Negligence/
Torts/Products Liability) |
| <input type="checkbox"/> Antitrust & Trade Regulation | <input type="checkbox"/> Family | <input type="checkbox"/> Litigation (Personal Injury) |
| <input type="checkbox"/> Appellate Practice | <input type="checkbox"/> Federal Practice | <input type="checkbox"/> Matrimonial |
| <input type="checkbox"/> Banking/Bonds | <input type="checkbox"/> General Practice | <input type="checkbox"/> Not-for-Profit Corporations |
| <input type="checkbox"/> Bankruptcy/Creditors' Rights | <input type="checkbox"/> Government | <input type="checkbox"/> Public Interest |
| <input type="checkbox"/> Collections | <input type="checkbox"/> Health | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Communications & Advertising | <input type="checkbox"/> Immigration | <input type="checkbox"/> Securities |
| <input type="checkbox"/> Constitutional | <input type="checkbox"/> Insurance | <input type="checkbox"/> Social Security/Medicare |
| <input type="checkbox"/> Corporate/Commercial | <input type="checkbox"/> Intellectual Property
(Copyright/Trademark/Patent) | <input type="checkbox"/> Tax |
| <input type="checkbox"/> Criminal | <input type="checkbox"/> International | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Discrimination/Civil Rights | <input type="checkbox"/> Judiciary | <input type="checkbox"/> Utilities |
| <input type="checkbox"/> Dispute Resolution: Arbitration,
Collaborative Law, Mediation | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Wills/Trusts/Estates |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Landlord/Tenant | <input type="checkbox"/> Workers' Compensation/
Disability |
| <input type="checkbox"/> Education | <input type="checkbox"/> Land Use/Zoning/Condemnation | |
| <input type="checkbox"/> Elder/Guardianship/Medicaid | <input type="checkbox"/> Legislation | |

Law School: _____

Bar Admission Year: _____ **Date of Birth:** _____

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

WBASNY Chapter Dues Schedule

Adirondack

<input type="checkbox"/> Sustaining Member	100.00
<input type="checkbox"/> Attorney Member	75.00
<input type="checkbox"/> Secondary Chapter	25.00
<input type="checkbox"/> Law Student	0.00

Bronx

<input type="checkbox"/> Sustaining Member	125.00
<input type="checkbox"/> Attorney Member	85.00

Brooklyn

<input type="checkbox"/> Admitted 4 years or more	125.00
<input type="checkbox"/> Admitted less than 4 years	85.00
<input type="checkbox"/> Retired Attorney	70.00
<input type="checkbox"/> Secondary Chapter	50.00

Capital District

<input type="checkbox"/> Sustaining Member	150.00
<input type="checkbox"/> Admitted over 10 years	125.00
<input type="checkbox"/> Admitted 3-10 years	100.00
<input type="checkbox"/> Admitted less than 3 years / Retired	75.00
<input type="checkbox"/> Law Student / Secondary Chapter	25.00
<input type="checkbox"/> Emeritus	0.00

Central New York

<input type="checkbox"/> Sustaining Member	130.00
<input type="checkbox"/> Admitted 1 year or more	100.00
<input type="checkbox"/> Admitted less < 1 yr / Awaiting admission	65.00
<input type="checkbox"/> Retired Attorney	70.00
<input type="checkbox"/> Law student	25.00

Del-Chen-O

<input type="checkbox"/> Sustaining Member	225.00
<input type="checkbox"/> Admitted 5 years or more	75.00
<input type="checkbox"/> Admitted less than 5 years	65.00
<input type="checkbox"/> Law School Graduate / Law Student	25.00
<input type="checkbox"/> Secondary Chapter	25.00

Finger Lakes

<input type="checkbox"/> Admitted 3 years or more / JD member	80.00
<input type="checkbox"/> Admitted less than 3 yrs. / Awaiting Adm.	70.00
<input type="checkbox"/> Retired Attorney	55.00
<input type="checkbox"/> Law Student	30.00

Mid-Hudson

<input type="checkbox"/> Sustaining Member	150.00
<input type="checkbox"/> Admitted 5 years or more	100.00
<input type="checkbox"/> Admitted less than 5 years	85.00
<input type="checkbox"/> Government/Public Sector / Nonprofit	75.00
<input type="checkbox"/> Law Student / Graduate	0.00
<input type="checkbox"/> Secondary Chapter	60.00

Mid-York (Mohawk Valley)

<input type="checkbox"/> Admitted 5 years or more	95.00
<input type="checkbox"/> Admitted less than 5 year	60.00
<input type="checkbox"/> Grad/Secondary Chapter	25.00
<input type="checkbox"/> Law Student	0.00

Nassau

<input type="checkbox"/> Sustaining Member	165.00
<input type="checkbox"/> Admitted 3 years or more	105.00
<input type="checkbox"/> Admitted less than 3 years	80.00
<input type="checkbox"/> Admitted less than 1 year	55.00
<input type="checkbox"/> Secondary Chapter	60.00
<input type="checkbox"/> Another State Bar	50.00
<input type="checkbox"/> Law School Grad / Law Student	0.00

New York

<input type="checkbox"/> Sustaining Member	250.00
<input type="checkbox"/> Admitted 10 years or more	175.00
<input type="checkbox"/> Admitted less than 10 years	150.00
<input type="checkbox"/> Admitted less than 5 years / Judicial	100.00
<input type="checkbox"/> Admitted less than 1 year / Graduate	55.00
<input type="checkbox"/> Another State Bar	125.00
<input type="checkbox"/> Secondary Chapter	60.00
<input type="checkbox"/> Retired	75.00
<input type="checkbox"/> Law Student	20.00

Orange-Sullivan

<input type="checkbox"/> Sustaining Member	150.00
<input type="checkbox"/> Admitted 4 years or more / Judiciary	125.00
<input type="checkbox"/> Admitted less than 4 years	100.00
<input type="checkbox"/> Graduate Awaiting Admission	55.00
<input type="checkbox"/> Law Student	0.00
<input type="checkbox"/> Secondary Chapter	25.00

Queens

<input type="checkbox"/> Sustaining Member	200.00
<input type="checkbox"/> Admitted 5 years or more	95.00
<input type="checkbox"/> Admitted less than 5 years	80.00
<input type="checkbox"/> Law Student	30.00

Rochester

<input type="checkbox"/> Sustaining Member	150.00
<input type="checkbox"/> Admitted 6 years or more	100.00
<input type="checkbox"/> Admitted between 1-5 years	75.00
<input type="checkbox"/> Admitted less than 1 year	55.00
<input type="checkbox"/> Graduate Awaiting Admission / Retired	55.00
<input type="checkbox"/> Law Student	0.00

Rockland

<input type="checkbox"/> Sustaining Member	130.00
<input type="checkbox"/> Attorney Member	95.00
<input type="checkbox"/> Law School Graduate	55.00
<input type="checkbox"/> Law Student / Secondary Chapter	40.00

Staten Island

<input type="checkbox"/> Sustaining Member	300.00
<input type="checkbox"/> Admitted 5 years or more / New member	100.00
<input type="checkbox"/> Admitted less than 5 years	75.00
<input type="checkbox"/> Graduate Awaiting Admission	55.00
<input type="checkbox"/> Law Student	25.00
<input type="checkbox"/> Secondary Chapter	50.00

Suffolk

<input type="checkbox"/> Sustaining Member	160.00
<input type="checkbox"/> Admitted 5 years or more	1100.00
<input type="checkbox"/> Admitted less than 5 years	85.00
<input type="checkbox"/> Adm. less than 1 year / Law School grad	60.00
<input type="checkbox"/> Secondary Chapter / Another State Bar	50.00
<input type="checkbox"/> Law Student	0.00

Thousand Islands

<input type="checkbox"/> Sustaining Member	225.00
<input type="checkbox"/> Admitted 5 years or more	75.00
<input type="checkbox"/> Admitted less than 5 years	65.00
<input type="checkbox"/> Graduate / Law Student / Secondary	25.00

Westchester

<input type="checkbox"/> Sustaining Member	210.00
<input type="checkbox"/> Admitted 10 years or more	160.00
<input type="checkbox"/> Admitted 5-10 years / Retired 60 yrs.+	110.00
<input type="checkbox"/> Admitted less than 5 years	60.00
<input type="checkbox"/> Graduate/Secondary Chapter	45.00
<input type="checkbox"/> Law Student	0.00

Western New York

<input type="checkbox"/> Sustaining Member	150.00
<input type="checkbox"/> Admitted 5 years or more	95.00
<input type="checkbox"/> Admitted less than 5 years	70.00
<input type="checkbox"/> Law Student	20.00

PAYMENT:

Enclosed is my check, made payable to **WBASNY**
Mail to: WBASNY, PO Box 936, NY, NY 10024

Card No.: _____

Expiration Date: ____ / ____ CVS: _____

Billing Zip Code: _____

Signature: _____