



# Wake County Bar Association, Inc.

## Membership Application

Please Print or Type

Name

Mr. Ms. First Middle Last Suffix

State Bar # Date of Issuance NCBA #

**Office Mailing Address**

P.O. Box  
 City/State/Zip  
 Office Phone  
 Office Fax  
 E-mail

**Office Street Address**

Street  
 City/State/Zip

**Home Address**

Street  
 City/State/Zip

**Additional Information**

Place of birth  
 Date of birth  
 Undergraduate Education  
 Undergraduate Degree  
 Law School Education  
 Law School Degree  
 Presently Associated With  
 Prior Legal Experience (If Any)  
 Military Service  
 Marital Status  
 If married, spouse's name

**Annual Membership Dues — \$125**

Membership dues are pro-rated for those who join after February, as follows:

**Fee Schedule**

March	\$120	July	\$100	November	\$80
April	\$115	August	\$95	December	\$75
May	\$110	September	\$90		
June	\$105	October	\$85		

Newly-licensed attorneys are eligible for 50 percent dues reduction during their first full year of membership in the Wake County Bar Association. Please check the appropriate box.

- First partial year**  
*Pro-rated per schedule  
 (Next year's dues statement will reflect 50% dues reduction)*
- First full year**  
*(Licensed less than 12 months – 50% dues reduction)*
- First full year**  
*(Licensed less than 12 months – Full Payment – 50% dues reduction option not exercised)*

Please charge my:  VISA  MasterCard  American Express

Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

FOR OFFICE USE ONLY						
NCBA#	DATE	CHECK#	AMOUNT	P	F	See reverse side

Application for Membership  
in  
Wake County Bar Association, Inc.

TO THE BOARD OF DIRECTORS  
Wake County Bar Association  
P.O. Box 3686  
Cary, NC 27519-3686  
(919) 677-9903

This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

Directors:

I hereby apply for membership in the Wake County Bar Association, Inc. (the "Association"), subject to the terms of its constitution and bylaws. I meet the membership requirements as set forth in Article II, Section 1 of the bylaws of the Association, which reads as follows: "The Corporation's membership shall consist of those licensed attorneys, and members of the judiciary of the State of North Carolina and of the United States, residing in or maintaining a law office (which shall include the offices of governmental and corporate or in-house counsel) in Wake County who have been admitted to membership in the Corporation pursuant to these bylaws." If any of the above-referenced circumstances change, I will promptly notify the Association of such change.

I understand that membership in the Association is voluntary and is not a prerequisite to practicing law in Wake County or elsewhere in North Carolina.

I agree to the following conditions of membership:

1. That if admitted to the Association, I will in good faith and to the best of my ability abide by the regulations of the Association while a member.
2. I will be expelled from the Association if I am disbarred or suspended from the North Carolina State Bar, or upon a finding by a two-thirds vote of the Association's Board of Directors that I have engaged in conduct that prejudices the legal profession, as prescribed in Article II, Section 7 of the Association's bylaws.
3. If I am elected to membership in the Association, I agree to pay all dues and assessments levied upon me while I am a member. That if my dues or assessments are not paid within such time as the Association's bylaws or regulations of the Association provide (including such period of grace as may be allowed), my membership in the Association will automatically be terminated. (If my membership is terminated for those reasons, I understand that any request that I may make for readmission will be treated like an original application.)

I enclose herein the admission fee of \$ \_\_\_\_\_, which includes dues for the current year (and which will be returned to me in the event my application is not accepted).

Very truly yours,

\_\_\_\_\_  
Please sign here