

**Member Information**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Preferred name for nametag: \_\_\_\_\_

Firm/Court/Organization: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Title/Position: Judge Attorney Legal Educator Other \_\_\_\_\_

Primary area(s) of practice: \_\_\_\_\_

Bar # \_\_\_\_\_ Bar State: \_\_\_\_\_ Admittance Date: \_\_\_\_\_

Assistant's Name: \_\_\_\_\_ Assistant's Phone: \_\_\_\_\_

Assistant's E-mail: \_\_\_\_\_

**Membership Intention**

I **will** renew my membership for the next Inn year

My membership category for the next Inn year should be: Associate Barrister Master of the Bench

I **will not** renew my membership for the next Inn year

**Optional**—Please share why you will not renew your membership for the next Inn year: \_\_\_\_\_

**Member Interests**

I am willing to serve in the following areas of Inn management:

- |                      |                  |           |                |
|----------------------|------------------|-----------|----------------|
| Leadership/Mentoring | Finance & Budget | Programs  | Membership     |
| Nametags             | Catering Liason  | Social    | Administration |
| Law School Liason    | Court Liason     | Directory | Website        |
| CLE                  | Any of the above |           |                |

**Masters only:** Are you willing to serve as a pupillage team captain? Yes No

Please provide suggestions for improving our Inn: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_