

#### **MEMBERSHIP FORM** 2023-2024

PERSONAL INFORMATION

Your Name	WSBA#
Firm Name	WSBA Admit Date
Birthdate	Other State License
Email	Phone #

**Full Mailing Address** 

Physical Address – if different from mailing address

#### **OPPORTUNITIES**

Circle all that interest you

Volunteer VLP Volunteer SCBA Diversity Section Family Law Section Indian Law Section

Intellectual Property Solo & Small Practice Young Lawyers Elder, Disability, Estate Planning (\$25/year)

Section Section (\$15/year) Division

## MEMBERSHIP DUES & DONATIONS

GENERAL	
MEMBERSHIP	
by Admittance to any	
State Bar	

After 12/31/22	gratis	
Between 8/31/21 and 12/31/22	\$110	
Before 9/1/21	175	

### OTHER MEMBERSHIP

Government/ Public Service	128	
Associate – attorneys without a Spokane	110	
County residence/office		
Court Clerk, LLLTs	110	
Registered Paralegal	60	
Law School Student	15	
Honorary – Judge or attorney with inactive WSBA license	Gratis	

#### ADD-ONS

Elder, Disability, Estate Planning Section (optional)	25	
Solo & Small Practice Section (optional)	15	
CLE Passport	275	
Courthouse Security Access Badge	75	

# DONATIONS Optional to affiliate nonprofit organizations

SCBA Volunteer Lawyers Program	\$
Carl Maxey Scholarship)	\$

TOTAL: Thank you!