

MEMBERSHIP



APPLICATION

I hereby make application for membership in the Passaic County Bar Association. My check for \$ _____ is attached (see fee schedule below). I certify that I am a member, in good standing, of the Bar of New Jersey.

NAME: _____

MONTH AND YEAR ADMITTED

HOME ADDRESS: _____

TO PRACTICE IN N.J. : _____ / _____

OFFICE PHONE: _____

FIRM NAME: _____

HOME PHONE: _____

FIRM ADDRESS: _____

FACSIMILE: _____

EMAIL: _____

WHAT BAR ASSOCIATION ACTIVITIES ARE OF INTEREST TO YOU:

☐ SOCIAL/NETWORK

☐ PROCEDURAL

☐ PRO BONO

☐ EDUCATIONAL

☐ ADMINISTRATIVE

☐ QUALITY OF LIFE

PLEASE DESIGNATE YOUR AREA OF INTEREST:

☐ CIVIL

☐ FAMILY

☐ COMMERCIAL

☐ CRIMINAL

☐ REAL ESTATE

☐ OTHER _____

IF YOU DO NOT WANT YOUR DATA TO BE PUBLISHED ON THE PCBA WEBSITE (www.passaicbar.org) CHECK THE FOLLOWING BOX.

☐ DO NOT INCLUDE MY NAME, ADDRESS, PHONE, FAX OR EMAIL IN THE WEBSITE MEMBERSHIP DIRECTORY

Date: _____

Signature

APPLICABLE DUES MUST ACCOMPANY THIS APPLICATION

PLEASE MAKE CHECK PAYABLE TO: "PASSAIC COUNTY BAR ASSOCIATION"

SEND COMPLETED APPLICATION AND PAYMENT TO:

PCBA, 77 HAMILTON ST., RM 243, PATERSON, NJ 07505

Fee Schedule

- a) Membership is free for the balance of the fiscal year in which New Jersey Admission conferred
- b) \$75.00 per year during the second and third years of admission to New Jersey Bar
- c) \$150.00 per year after fourth year of admission.
- d) \$10.00 donation (voluntary) to the Hon. Nicholas G. Mandak Scholarship Fund.