

# SHASTA-TRINITY COUNTIES BAR ASSOCIATION

## 2026 Membership Renewal/Application

\*NAME: \_\_\_\_\_ STATE BAR #: \_\_\_\_\_

FIRM NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

WK TELEPHONE: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

\*\*EMAIL ADDRESS: \_\_\_\_\_

*\*\*A majority of the communications from the STCBA are sent by e-mail.*

### Annual Membership Dues

**General Membership \$50.00**

**Public Entity \$35.00**

**\*If you are renewing for more than one person in your firm, please list each additional name, their CA State Bar number, and email address in the space provided below:**

Name: \_\_\_\_\_ Bar #: \_\_\_\_\_

Name: \_\_\_\_\_ Bar #: \_\_\_\_\_

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

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

Name: \_\_\_\_\_ Bar #: \_\_\_\_\_

Name: \_\_\_\_\_ Bar #: \_\_\_\_\_

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

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

Name: \_\_\_\_\_ Bar #: \_\_\_\_\_

Name: \_\_\_\_\_ Bar #: \_\_\_\_\_

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

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

**Total Amount of Check:    \$ \_\_\_\_\_**

**Please return this form with check to:**

Shasta-Trinity Counties Bar Association  
2205 Hilltop Drive #325  
Redding, CA 96002

**Please make checks payable to:** "Shasta-Trinity Counties Bar Association" or "STCBA"