

Ulster County Bar Association
Post Office Box 3084, Kingston, NY 12402
ulstercountybar@gmail.com
Application for Membership

Name: _____ Date of Birth: _____

Office Address Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Mailing Address Address: _____

(If different than _____

office address) City: _____ State: _____ Zip: _____

Phone Number: _____ Fax _____

E-mail Address: _____

Education: (colleges and law schools attended, with degrees received and years of graduation)

Year of admission to New York State Bar: _____

Have you ever been disbarred, suspended, censured or found guilty of professional misconduct by any court. Yes No

If you answered yes to the above question, please explain the circumstances on a separate page.

Dues: \$40.00 for attorneys admitted to practice law for less than 5 years; \$75.00 if admitted to practice 5 years or more; **no fee if admitted 50 years or longer.**

Please include a copy of your certificate of good standing with your application. Mail your application, certificate of good standing and dues payment to Ulster County Bar Association, P.O. Box 3084, Kingston, New York 12402.