

MIDDLESEX COUNTY BAR ASSOCIATION

APPLICATION FOR MEMBERSHIP

Membership Requirements: The Applicant must, at the time of submission of this Membership Application, either: (1) reside in; (2) maintain a law office in; or (3) be employed within Middlesex County, Connecticut.

Name of Applicant: _____

Home Address: _____

Name of Law Firm/Employer: _____

Business Address: _____

Business Phone: _____ Business Fax: _____

Business e-mail: _____ *(this is generally where all communications will be sent)

Law School: _____ Degree Received: _____

City and State of Law School: _____ Date Degree Received: _____

Date Admitted to Connecticut Bar: _____

I hereby apply for membership in the Middlesex County Bar Association, Inc. and represent that the information set forth above is true and correct:

Date

Signature of Applicant

DUES: (Please submit with application)

Licensed to practice law in the State of Connecticut for:

____ Less than a year:

____ More than one year, but less than 3 years:

____ Three or more years:

____ Seventy years of age or older:

____ More than one year, but joining between Jan. 1st & June 30th:

Exempt through June 30th of this Association Year

\$75.00

\$125.00

Exempt commencing July 1st of the 70th year

\$55.00 for remainder of this Association Year

Please return to:

Meghann E. LaFountain, Esq.
Treasurer, Middlesex County Bar Association, Inc.
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