



SOUTHEAST DISTRICT BAR ASSOCIATION
 12749 Norwalk Blvd., Suite 104, Norwalk, CA 90650
SEDBAinfo@gmail.com

2020 APPLICATION FOR MEMBERSHIP

Our Mission Statement

The mission of the Southeast District Bar Association is to enhance and serve the educational and professional needs of its membership, to promote the integrity of the profession, to encourage collegiality and interaction with the judiciary, and to provide access to legal services and the judicial system.

Membership Information and Payment		
<u>Membership Types & Duties</u> <input type="checkbox"/> Law Student (<i>FREE</i>) <input type="checkbox"/> Attorney, Less than 1 year (<i>FREE</i>) <input type="checkbox"/> Court Employee (<i>\$75</i>) <input type="checkbox"/> Government (<i>\$100</i>) <input type="checkbox"/> Standard Membership (<i>\$150</i>)	<input type="checkbox"/> Payment by check. Please make check payable to: SEDBA Please charge my: Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Amex <input type="checkbox"/>	
Name on Credit Card		
Card No.	Expiration Date	Security Code
Card Billing Address, City and Zip Code:		
Signature of Credit Card Holder Required for Authorization:		

Membership to Southeast District Bar (SEDBA). SEDBA membership includes one (1) ticket to four (4) regular membership meetings with MCLE Credit (meals included) and eligibility for discounts offered by SEDBA affiliated vendors and SEBAMB Newsletter.*

*Does not include Special Events, the Summer Social, the Randy Kramer Poker Tournament, Judges' and Past Presidents' Night or the Holiday Party.

Contact Information			
First Name	M.I.	Last Name(s)	Suffix
Title (e.g. Attorney at Law, US Attorney, etc.)			
Are you a previous SEDBA Member? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Firm or Company Name			
Address	City	State	Zip Code
Office Telephone Number	Mobile Telephone Number		
Work/School E-mail	Personal E-mail		
Firm Size: Solo Practitioner <input type="checkbox"/> 2-5 Attorneys <input type="checkbox"/> 6-10 Attorneys <input type="checkbox"/> 11-15 Attorneys <input type="checkbox"/> 15+ Attorneys <input type="checkbox"/>			
Areas of Practice:	Certified Specialties:		
Other Memberships: LACBA WBA LBBA MABA OCBA			

Biographical Information		
Law Schools Attended	Year Graduated	
Licensed by: State of California	Other State(s) Licensed by:	
Date of California Bar Admission	State Bar Number	
Undergraduate School	Degree Received	Year Received

*We will be contacting you predominately through email. Therefore be sure to give the email for the person at your office who is in the best position to follow up with us.

I hereby authorize the Southeast District Bar Association staff to send any forms, notices, bulletins, announcements, billings, etc., via facsimile or email.

SUBMIT COMPLETED APPLICATION AND PAYMENT TO:

Southeast District Bar Association
 12749 Norwalk Boulevard, Suite 104
 Norwalk, California 90015
SEDBAinfo@gmail.com

Signed: _____

Date: _____