



# LAKE COUNTY BAR ASSOCIATION

1078 W. 84th Drive, Merrillville, IN 46410

Phone: (219) 738-1906 Fax: (219) 736-6400 Email: executive@lakecountybar.com

**RETURN THIS FORM ALONG WITH PAYMENT TO:  
LAKE COUNTY BAR ASSOCIATION  
1078 W. 84<sup>th</sup> Drive, Merrillville, IN 46410**

Atty Name: \_\_\_\_\_  
Attorney ID # \_\_\_\_\_  
Date of Admittance \_\_\_\_/\_\_\_\_/\_\_\_\_

### LEGAL SUPPORT SECTION MEMBER

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Firm Name: \_\_\_\_\_

For the 2020 Directory listings, please PLACE AN "X" if you are a

- Indiana State Bar Association Member \_\_\_\_\_
- Family Arbitrator \_\_\_\_\_
- Civil Arbitrator \_\_\_\_\_
- Family Mediator \_\_\_\_\_
- Civil Mediator \_\_\_\_\_
- Guardian Ad Litem \_\_\_\_\_
- Parenting Time Coordinator \_\_\_\_\_


\_\_\_\_\_ YES \_\_\_\_\_ NO

My firm has 5 or more attorneys and should be listed in the "Firm Listings" Section of the Directory

\_\_\_\_\_ YES \_\_\_\_\_ NO

I am a current member of the LCBA 2019-20 Referral Panel and should be listed in the "Find a Lawyer by Practice Area" in the Directory

## 2019-20 MEMBERSHIP DUES INVOICE LCBA MEMBERSHIP FEE

Admitted 2018-2019	FREE
Admitted 2016-2017	\$145.00
Admitted prior to 2015	\$205.00
Judicial Officers	\$100.00
 LEGAL SUPPORT SECTION "LSS" MEMBER	\$50.00
Law Students	FREE

### SECTION MEMBERSHIP

Bankruptcy Law	\$10.00
Business Law	\$10.00
Civil Litigation	\$25.00
Criminal Defense Law	\$50.00
Employment Law	\$25.00
Family Law	\$25.00
Municipal Law	\$25.00
Probate & Trust Law	\$25.00
Solo and Small Firm Section	\$25.00
Young Lawyers (first 10 years of practice, admitted 2009 or later)	FREE

### DONATIONS AND SUBSCRIPTIONS

<b>LCBA SCHOLARSHIP FUND</b> Please support the Lake County Bar Association's Scholarship Fund. Your contribution assists Indiana Law Students in achieving their goals of becoming a member of the legal community. *Suggested Donation, you may donate any amount you wish*	\$50.00*
<b>PRO BONO DONATION</b> LCBA is a supporter of the Pro Bono Project which helps us fulfill our professional obligations to persons of limited means by screening and referring clients to volunteer attorneys. The recommended donation of \$50 or more will help defray the costs of recruitment, referral and follow-up. We also encourage you to complete the volunteer attorney sign-up form at <a href="http://www.nwivolunteerlawyers.org">http://www.nwivolunteerlawyers.org</a> .	\$50.00**
**Suggested Donation, you may donate any amount you wish**	
Indiana Lawyer Subscription	\$19.00
<b>RENEW BEFORE JULY 1, 2019</b> Early Bird Discount of \$5.00 off your membership	-\$5.00
I prefer U.S Mail Delivery of the Minute Sheet Instead of electronic delivery (add \$25.00 to membership balance if chosen)	+\$25.00
<b>TOTAL DUE</b>	<b>\$</b>



**PLEASE COMPLETE THIS FORM IN ITS ENTIRETY**

**WEBSITE:**  
**IF YOU WOULD LIKE YOUR PICTURE TO APPEAR IN THE PICTORIAL DIRECTORY ON THE WEBSITE, EMAIL PROFESSIONAL HEADSHOT TO:**  
[executive@lakecountybar.com](mailto:executive@lakecountybar.com)

**PLEASE LIST YOUR ASSISTANT'S NAME AND EMAIL IF YOU WOULD LIKE THEM LISTED WITH YOUR DIRECTORY LISTING.** →

**2019-20 MEMBER CONTACT INFORMATION WHICH WILL APPEAR IN THE LCBA DIRECTORY AND WEBSITE LISTING**

Please complete the information below:

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

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

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

\_\_\_\_\_

TELEPHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Optional Information:

ASSISTANT'S NAME: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**IF YOU DO NOT HAVE A PERMANENT PHYSICAL OFFICE IN LAKE COUNTY, DO YOU RESIDE IN LAKE COUNTY?\***         Yes                           No

\*This question resolves the issue of whether you qualify for full membership or Associate Membership. Attorneys who neither reside in nor have physical offices in Lake County are considered "associate members." Associate members cannot vote in elections or hold office, but receive all other benefits of membership. They are not distinguished from regular members in the Directory. Their opinions will be solicited in all polls and evaluations sponsored by the LCBA, and Associate Members are represented to the Board by an Associate Member Liaison.

**PLEASE NOTE:**

**Tax Information** – According to the ABA, dues payments are deductible by members as an ordinary and necessary business expense to the extent permitted by law. Contributions included with your dues payment and indicated for the LCBA Scholarship Fund and/or Pro Bono Project are deductible as a charitable contribution.

**Referral Attorneys** – You are required to keep your dues current in order to remain in the referral program. Any members who are not current in their dues will automatically be dropped from the referral network.



Please indicate whether you will pay by Credit Card below or whether you want to pay by attached Check No. \_\_\_\_\_. Please email my credit card receipt to: \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_ AUTH. CODE: \_\_\_\_ TOTAL AMOUNT: \_\_\_\_\_

CHECK HERE IF BILLING AND MEMBERSHIP ADDRESS ARE THE SAME.