



LAKE COUNTY BAR ASSOCIATION

1078 W. 84th Drive, Merrillville, IN 46410

Telephone: (219) 738-1906

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

RETURN THIS FORM ALONG WITH
PAYMENT TO:

LAKE COUNTY BAR ASSOCIATION
1078 W. 84th Drive, Merrillville, IN 46410

First Name: _____

Last Name: _____

If Attorney or Judicial Officer, please provide:

Attorney ID # _____

Date of Admittance ____/____/____

**PLEASE COMPLETE DETAILED
CONTACT INFORMATION
ON PAGE 2**

For the 2021 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
2010-21 Referral Panel and should be
listed in the "Find a Lawyer by Practice
Area" in the Directory

2020-21 MEMBERSHIP DUES INVOICE

1) LCBA MEMBERSHIP FEE

ATTORNEY Admitted 2019-2020	FREE	
Admitted 2017-2018	\$145.00	
Admitted prior to 2017	\$205.00	
JUDICIAL OFFICER	\$100.00	
LEGAL SUPPORT (includes LSS Section membership)	\$50.00	
LAW STUDENT	FREE	

2) SECTION MEMBERSHIP

Bankruptcy Law	\$25.00	
Business and Real Estate Law	\$25.00	
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 2010 or later)	FREE	

3) DONATIONS AND SUBSCRIPTIONS

LCBA SCHOLARSHIP FUND 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*
PRO BONO DONATION 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 http://www.nwivolunteerlawyers.org . **Suggested Donation, you may donate any amount you wish**		\$50.00**
Indiana Lawyer Subscription		\$19.00
LCBA Membership Year runs July 1, 2020 through June 30, 2021		
RENEW BEFORE JULY 1, 2020 to SAVE \$5.00 off your membership fee (from step 1)	Early Bird Discount	-\$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
4) TOTAL DUE		\$



WEBSITE:

- **PICTORIAL DIRECTORY OF ATTORNEYS AND JUDICIAL OFFICERS**

EMAIL PROFESSIONAL HEADSHOT TO:

executive@lakecountybar.com

(IF YOU DO NOT WANT YOUR INFORMATION INCLUDED ON THE WEBSITE, CONTACT LCBA)

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

2020-2021 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: _____

WEBSITE: _____

Optional Information for Attorney Members:

ASSISTANT'S NAME: _____

EMAIL: _____

Are they a member of the LCBA LEGAL SUPPORT SECTION Yes No
To join as a Legal Support LCBA Member, please complete a separate form.

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.



_____ Payment with attached CHECK # _____ (your check is your receipt)

_____ Payment with CREDIT CARD, EMAIL 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.