

WISCONSIN ASIAN BAR ASSOCIATION

MEMBERSHIP APPLICATION

NAME: _____

FIRM/ORGANIZATION: _____

BUSINESS ADDRESS: _____

BUSINESS PHONE: _____ FAX: _____

HOME ADDRESS: _____

HOME PHONE: _____

EMAIL ADDRESS: _____

SCHOOL(S) ATTENDED: _____

DATE OF GRADUATION: _____

DATE OF BAR ADMISSION(S): _____

STATES ADMITTED TO PRACTICE: _____

AREA OF PRACTICE: _____

OTHER PROFESSIONAL MEMBERSHIPS:

MEMBERSHIP DUES:

_____ ACTIVE MEMBER WITH VOTING PRIVILEGS: \$50.00

_____ NONACTIVE MEMBER WITH NO VOTING PRIVILEGES: \$30.00