

NEW YORK STATE BAR ASSOCIATION



NYSBA 2015 Membership Application

Please check the appropriate box: I wish to join the New York State Bar Association I wish to reactivate my membership
 I wish to join the Sections checked below (NYSBA membership required)

ENROLLMENT INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____

The above address is my Home Office Both

Please supply us with an additional address.

Address _____

City _____ State _____ Zip _____

Office phone (_____) _____

Home phone (_____) _____

E-mail address _____

Fax number (_____) _____

Date of birth _____ / _____ / _____

Law school _____ Graduation date _____

States and dates of admission to Bar: _____

DUES PAYMENT

Association Membership Dues

Section Dues
 (Optional) \$

TOTAL ENCLOSED : \$

METHOD OF PAYMENT: Check (payable in U.S. dollars) AIP (see reverse)

MasterCard Visa American Express Discover

Account Number

Expiration Date _____ Date _____

Signature _____

New members: Please include proof of your admission to the practice of law.

Please return this application to: **STATE BAR SERVICE CENTER,**
 New York State Bar Association, One Elk Street, Albany NY 12207
 Phone 800.582.2452/518.463.3200 • FAX 518.463.5993
 E-mail sbcs@nysba.org • www.nysba.org

ANNUAL MEMBERSHIP DUES (check One)

Class based on first year of admission to bar of any state.
 Membership year runs January through December.

ACTIVE/ASSOCIATE IN-STATE ATTORNEY MEMBERSHIP

<input type="checkbox"/> Attorneys admitted 2007 and prior	\$275
<input type="checkbox"/> Attorneys admitted 2008-2009	185
<input type="checkbox"/> Attorneys admitted 2010-2011	125
<input type="checkbox"/> Attorneys admitted 2012-2014	60

ACTIVE/ASSOCIATE OUT-OF-STATE ATTORNEY MEMBERSHIP

<input type="checkbox"/> Attorneys admitted 2007 and prior	\$180
<input type="checkbox"/> Attorneys admitted 2008-2009	150
<input type="checkbox"/> Attorneys admitted 2010-2011	120
<input type="checkbox"/> Attorneys admitted 2012-2014	60

OTHER

<input type="checkbox"/> Sustaining Member	\$400
<input type="checkbox"/> Affiliate Member	185
<input type="checkbox"/> Newly Admitted Member	FREE
<input type="checkbox"/> Law Student Member	10

DEFINITIONS

- Active In-State = Attorneys admitted in NYS, who work and or reside in NYS
- Associate In-State = Attorneys not admitted in NYS, who work and or reside in NYS
- Active Out-of-State = Attorneys admitted in NYS, who neither work nor reside in NYS
- Associate Out-of-State = Attorneys not admitted in NYS, who neither work nor reside in NYS
- Sustaining = Attorney members who voluntarily provide additional funds to further support the work of the Association
- Affiliate = Person(s) holding a JD, not admitted to practice, who work for a law school or bar association
- Newly admitted = Attorneys newly sworn into the practice of law
- Law Students = Person(s) enrolled in an ABA accredited law school from 1-3L (includes law graduate students, within 2 years of graduation only, awaiting admission)

SECTIONS — I WISH TO JOIN THE FOLLOWING SECTION(S):

<input type="checkbox"/> Antitrust*	\$30.	<input type="checkbox"/> Judicial (Courts of Record)	25.
<input type="checkbox"/> Business Law**	25.	<input type="checkbox"/> Labor & Employment Law**	35.
<input type="checkbox"/> Commercial & Federal Litigation*	40.	<input type="checkbox"/> Municipal Law*	30.
<input type="checkbox"/> Corporate Counsel*	30.	<input type="checkbox"/> Real Property Law*	40.
<input type="checkbox"/> Criminal Justice*	35.	<i>(Attorneys admitted 2009-2014 are half price)</i>	
<input type="checkbox"/> Dispute Resolution***	35.	<input type="checkbox"/> Senior Lawyers	20.
<input type="checkbox"/> Elder Law & Special Needs*	30.	<i>(Attorneys age 55 and over)</i>	
<input type="checkbox"/> Entertainment, Arts & Sports Law*	35.	<input type="checkbox"/> Tax*	25.
<input type="checkbox"/> Environmental Law*	35.	<input type="checkbox"/> Torts, Insurance, & Compensation Law**	40.
<input type="checkbox"/> Family Law*	35.	<input type="checkbox"/> Trial Lawyers*	30.
<input type="checkbox"/> Food, Drug & Cosmetic Law*	25.	<input type="checkbox"/> Trusts & Estates Law**	40.
<input type="checkbox"/> General Practice**	25.	<input type="checkbox"/> Young Lawyers	20.
<input type="checkbox"/> Health Law*	30.	<i>(Law Students and attorneys admitted less than 10 years)</i>	
<input type="checkbox"/> Intellectual Property Law*	30.		
<input type="checkbox"/> International†	35.		

* Law Student Rate: half price ** Law Student Rate: \$5
 *** Law Student Rate: \$10 † Law Student Rate: \$12.50 Section Dues Total \$ _____

Automated Installment Plan (AIP) Enrollment Form

Save Time with AIP

Now New York State Bar Association (NYSBA) members can save time with direct dues payment. An alternative to writing checks and mailing your membership dues, with AIP you can authorize NYSBA to withdraw payments electronically from your credit card account. Go to www.nysba.org/AIP for more information. You can conveniently sign up for AIP on the enrollment form below. It's safe, easy and convenient!

Member Information

Name: _____ NYSBA Membership ID #: _____

Address: _____

Address: _____

City, State, Zip: _____

Phone Number: _____ E-mail: _____

Payment Schedule

1 Full Payment
 2 Payments
 3 Payments
 4 Payments

AIP — Credit/Debit Card Authorization

Credit Card AMEX DISC MC VISA

Credit Card Number:

Exp. Date: /

Authorized Signature: _____

AUTOMATED INSTALLMENT PLAN (AIP) ENROLLMENT AUTHORIZATION I hereby authorize NYSBA to instruct my financial institution to deduct directly from my account the amount necessary for my annual membership, per the payment schedule selected above: 1, 2, 3 or 4 payments on or about the 25th of the relative month(s). All installment payments must be completed by August 25, 2015. Those opting into the installment payment program in May, June, July or August of the current year may have their payments consolidated and accelerated to meet this requirement. By selecting the AIP method **I understand this agreement will remain in effect for future membership years, unless I request cancellation in writing to:** NYSBA, Dues Processing, One Elk Street, Albany, NY 12207.

Total to be debited: \$.

Signature: _____ Date: _____

Please return this form to: NYSBA, State Bar Service Center, One Elk Street, Albany, NY 12207
Phone 800.582.2452/518.463.3200 FAX 518.463.5993
E-mail sbcs@nysba.org

IMPORTANT NOTICE: Contributions to The New York Bar Foundation are tax deductible as charitable contributions. Membership dues to the New York State Bar Association are not tax deductible as charitable contributions for income tax purposes. However, they may be tax deductible as ordinary and necessary business expenses subject to restrictions imposed as a result of association lobbying activities. The NYSBA estimates that the non-deductible portion of your 2015 dues which is allocated to lobbying is approximately 2.0%. Portions of your dues payment are allocated toward the annual publication subscriptions for the following: *NYSBA Journal*, \$14.75; *New York State Law Digest* \$6.25; *State Bar News* \$7.25.