Waukesha County Bar Association
Annual Membership Application
7/1/2022 to 6/30/2023

Name:_____* **State Bar No.**:_____*
(*leave blank if listing multiple members below)

Firm Name:_____

_____

Street (Include Suite Number) **City** **ZIP**

Phone:_____ **Email**:_____*

Signing up multiple members of the same firm? Please simply list all individuals on the lines below. Use additional forms as needed.

Name	State Bar No.	Practice *(see below options)*	Email
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Practice:

( ) **REGULAR** (Admitted to practice prior to July 1, 2017)……$65

( ) **NEW LAWYER** (Admitted to practice on/after July 1, 2017)……$30

( ) **JUDICIAL** (active or retired)……$55

( ) **RETIRED** (age 70 and over)……$30

( ) **INACTIVE** (classified as inactive by state bar) ……$30

Amount Enclosed: $ _____ (Payable to WCBA)

Membership may also be renewed online.
Some events may be virtual. Please check our website at www.waukeshabar.org for further information.

Return this application along with payment to:
Waukesha County Bar Association
PO Box 88
Waukesha, WI 53187-0088