



APPLICATION FOR LAW STUDENT MEMBERSHIP

I hereby apply for membership in the Florida Defense Lawyers Association:

Last Name: _____ First: _____ Middle: _____

School: _____

Home Address: _____

Phone Number: _____ E-mail Address: _____

Permanent Mailing Address (If different from above): _____

Expected Graduation Date: _____

Are you a member of a student organization? Yes No

Name of organization(s):

What is your intended future primary area of practice, if known?

Law Student Membership Annual Dues: \$20 (Law student memberships expire six months after graduation.)

I am currently enrolled as a full time or evening student pursuing a J.D. degree at the school identified above.

I hereby certify the above information to be true and correct.

Signature of applicant: _____ Date: _____

Please return the completed application to the FDLA office and **enclose first year dues**. To pay by credit card, please visit www.fdma.org and complete the online application.

Ana Ramos - Executive Director
Florida Defense Lawyers Association
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786-447-8469 / aramos@fdla.org / www.fdma.org

FDLA is exempt from Federal taxation under IRC 501 (c)(6). Membership dues are not tax deductible as a charitable contribution; they may be deductible as a business expense.