

**APPLICATION FOR MEMBERSHIP IN THE  
DECATUR BAR ASSOCIATION**

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This application must be endorsed by three active members of this Association under the Endorsement section below.

Name of applicant: \_\_\_\_\_

Business address: \_\_\_\_\_

Presently employed by: \_\_\_\_\_

Home address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of admission to Illinois bar: \_\_\_\_\_ ARDC No. \_\_\_\_\_

Other states in which admitted: \_\_\_\_\_

Prelegal work taken at: \_\_\_\_\_

Graduated: \_\_\_\_\_ Degree: \_\_\_\_\_

Law School: \_\_\_\_\_

Graduated: \_\_\_\_\_ Degree: \_\_\_\_\_

Prior employment (briefly state background and professional experience since admission to the Bar):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

[ ] Please add my picture to the Decatur Bar Association Website. (Send photo to \_\_\_\_\_)

Dated: \_\_\_\_\_  
Signature

**Endorsement:** We, the undersigned active members of the Decatur Bar Association, certify that we are acquainted with the above-named applicant and we recommend the approval of his/her election to membership in the Decatur Bar Association.

- 1. \_\_\_\_\_ 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**Dues for Members of the Association are as follows:**

Active Members, admitted to practice more than 5 years on July 1	\$100.00
Active Members, Admitted to practice between 1 and 5 years on July 1	\$35.00
Members admitted to practice less than 1 year	None
Members admitted to practice more than 50 years on January 1	None

Persons applying for new membership after January 1 shall pay one-half of the annual dues otherwise payable for members of their class. Contact information and photos of members may be included on the Association website.

Send application to Decatur Bar Association, PO Box 523, Decatur, IL 62525-0523