



# HAMPDEN COUNTY BAR ASSOCIATION

50 State Street, P. O. Box 559  
Springfield, MA 01102-0559  
Phone: (413) 732-4660 ♦ Fax: (413) 732-6882  
www.hcbar.org

## MEMBERSHIP APPLICATION

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Are you a member of a firm? \_\_\_\_\_ Firm Name: \_\_\_\_\_

Primary Email Address: \_\_\_\_\_ Secondary Email Address: \_\_\_\_\_

Office Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Website: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Please send all mail to my office \_\_\_\_\_ Please send all mail to my home \_\_\_\_\_

### Education:

Undergraduate College/University: \_\_\_\_\_

City/State: \_\_\_\_\_ Degree Received: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

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

City/State: \_\_\_\_\_ Degree Received: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

Date admitted to Massachusetts Bar or anticipated date: \_\_\_\_\_ BBO# \_\_\_\_\_

Have you ever been disciplined, suspended from practice, or disbarred in any state? \_\_\_\_\_ **If yes, please explain on reverse.**

### ANNUAL DUES

1 <sup>st</sup> year after admission to Massachusetts Bar.....	FREE
2 <sup>nd</sup> and 3 <sup>rd</sup> year after admission to Massachusetts Bar.....	\$50.00
4 <sup>th</sup> and 5 <sup>th</sup> year after admission to Massachusetts Bar.....	\$75.00
6 or more years after admission to Massachusetts Bar.....	\$150.00
Government/Social Service.....	\$50.00
Primary Income Bar Advocate Work.....	\$50.00
Age 70 and over.....	FREE
Judges.....	FREE
Law Student.....	FREE

**Please make checks payable to Hampden County Bar Association or fill out credit card information:**

Type of card: VISA /MasterCard /Discover/AmEx Card number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code (3 or 4 digit code in signature box on back): \_\_\_\_\_

Billing address, if different: \_\_\_\_\_

\_\_\_\_\_ Name on Card: \_\_\_\_\_

**I hereby apply for membership to the HAMPDEN COUNTY BAR ASSOCIATION.  
By signing below, I agree that I am a current member in good standing of the Massachusetts Bar.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_