

## **AFFILIATE MEMBER APPLICATION 2017-18**

Rockland County Bar Association
337 North Main Street, New City, N.Y. 10956
845-634-2149 www.rocklandbar.org

<b>DUES:</b> Corporation	ons, Companies and Partners	ships, up to 4 designees \$1000 per	
(Please check one)			
		Individuals \$250 per y	ear
NAME: (Primary Cor	ntact)		
COMPANY NAME A	ND ADDRESS:		
	<del></del>	· · · · · · · · · · · · · · · · · · ·	
NATURE OF BUSINE	:SS:		
PHONE:*	FAX:*	E-MAIL:*	
Membership in Oth	er Bar Associations:		
certifies that, I am a	principal of a commercial or p	ship in the Rockland County Bar Association rofessional business, or that I am an emploeys in the furtherance of the legal profession	yee
	(Primary) APPLICAN	T'S SIGNATURE	
	THE ROCKLAND COUNTY BAR A	MUST PROVIDE US WITH THE NAMES OF TWO ASSOCIATION THAT ARE WILLING TO PROPOS	
Name of Propose	<del></del> (	Name of Seconder	_
(See reverse side fo	or Committee Choices)	*Required	
(*Required)		See Over for Committee Choices	

## **ALL APPLICANTS: REQUEST FOR COMMITTEE SERVICE 2017-2018**

1	A section of Comment Disc.	1.4	I 1: -: D: C
1.	Assigned Counsel Plan	14.	Judiciary Review Screening*
2.	Commercial/Corporate Law Condominium & Co-op	15.	Law Day
3. 4.		16. * 17.	Lawyers Helping Lawyers Membership & Public Relations
4. 5.	Continuing Legal Education* Criminal Law	17. 18.	Memorials
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6. 7.	Debt Collection & Creditor F Elder Law	20.	New Lawyers & Social Committee Personal Injury & Compensation
7. 8.	Employment Law	20.	Law
9.	Family Law	21.	Professional Ethics
10.	Grievance*	22.	Real Estate
11.	Immigration	23.	Surrogate's Court & Estate
11. 12.	Internship/Mentoring	43.	Planning
13.	Judiciary Liaison	24.	Zoning
13.	Judicial y Liaison	<b>44.</b>	Zoming
*App	ointments to these committees	are at the discreti	on of the President.
			Service on a committee is a privilege
not a	right. Your attendance and pa	irticipation at com	imittee meetings is expected.
Comn	nittee Selections for 2017 – 2018	1 <sup>st</sup>	
		2 <sup>nd</sup>	
		<b>2</b> rd	
		3	
GROUP A	AFFILIATE MEMBERSHIPS	(corporations, cor	npanies, partnerships): Please list up to 4
designees	and provide contact information.	All designees wil	l be added to the RCBA Membership List.
			ections. Please print legibly. Thank you.
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