

Morris County Bar Association

Application for Membership

To the Officers and Members of the Morris County Bar Association:

The Undersigned _____
(Please type)

hereby makes application to become a member of the Morris County Bar Association.

The applicant resides at _____

The applicant is associated with (if self employed, so designate) _____

The applicant's office address is _____

The applicant was admitted to the Bar of New Jersey at the _____ Term, _____
(Fall or Spring) (Year)

The applicant promises, if elected, to abide by the rules and regulations of the Association.

(Applicant's Signature)

(Telephone Number)

(Fax Number)

(Email Address)

DUES

5 years or less	\$105.00	Please note dues include a \$5 voluntary contribution to the Morris County Bar Foundation
More than 5 years	\$185.00	
F/T Government Employee less than 5 years	\$55.00	
F/T Government Employee over 5 years	\$135.00	
Honorary – 50-year members	N/C	
Judicial Law Clerks	N/C	
Law Students	N/C	

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