



ALLIANCE OF BLACK WOMEN ATTORNEYS OF MARYLAND

<http://www.msba.org/lnks/md/specialty/abwa/Index.htm>

**MEMBERSHIP APPLICATION
20011-2012**

New Member _____ Renewal _____

NAME _____

HOME ADDRESS _____

HOME PHONE _____ WORK PHONE _____

EMPLOYER _____

EMPLOYER ADDRESS _____

EMAIL ADDRESS _____

AREA(S) OF SPECIALTY _____

STATE BAR MEMBERSHIP(S) _____

LAW SCHOOL _____

DUES CATEGORIES: (Select one)

MEMBERSHIP

ASSOCIATE MEMBERSHIP (Non-Voting)

____ \$50.00 (Graduated more than 5 years)

____ \$10.00 (Law Student)

____ \$40.00 (Graduated 3-5 years)

____ \$30.00 (Graduated less than 3 years)

COMMITTEES OF INTEREST: ____ Membership ____ Finance ____ Judicial Selection

Please Make Check Payable and Mail To:

**Alliance of Black Women Attorneys of Maryland
Attn: Membership
P.O. Box 23784
Baltimore, MD 21203**