WORCESTER COUNTY BAR ASSOCIATION MEMBERSHIP APPLICATION FORM FOR FISCAL YEAR ENDING AUGUST 31, 2020

Full Name:			
Firm:			
Office Address:			
City, State, Zip:			
Office Phone:	Fax:	Email:	
Residence:		City,State, Zip:	
Law School:		Year Admitted to Practice:	
Year Admitted in MA:		BBO#:	
		Annual Dues	
PLEASE CHECK FOR APPR	OPRIATE MEMBER	RSHIP CATEGORY:	
6-9 years admitted to any Bar 3-5 years admitted to any Bar 2 nd year admitted to any Bar (21 st year admitted to any Bar (21)	(2011-2014) (2015-2017) 2018)	lier)	\$180.00 \$140.00 \$80.00
Government/Social Service Adjunct Membership* Associate Membership*** Retired Membership***			\$110.00 \$ 75.00 \$ 75.00 \$ 75.00
** An Associate Membership is a no *** A Retired Membership is an atto	on-attorney member as des orney with an inactive stat	monwealth of Massachusetts that does not live or have an offi fined in the Association's by-laws. Associate Members need tus with the BBO. for hold any office in the Association.	
Please check her	e if you are interest	ted in receiving an application for the Lawyer R	eferral Service.
Please check her	e if you are interest	ted in becoming a Sustaining Member of the W	CBA.

[•]Dues for membership in the Worcester County Bar Association are not deductible as a charitable contribution for income tax purposes. However, such dues may be deductible as a business expense.