

**LAW STUDENT**

**MEMBERSHIP DEFINITION:** Any person who is a law student attending an ABA accredited law school in Allegheny County or who is an Allegheny County resident attending an ABA accredited law school elsewhere shall be eligible for law student membership.

Law student members shall be entitled to the rights and privileges of active members except that law student members shall not have the right to vote or hold office in the Association or serve as a voting member of any committee of the Association.

**BENEFITS INCLUDE:** Eligibility to participate in the activities of the ACBA and its Young Lawyers Division and Women In The Law Division, attend CLE programs, serve with attorneys on committees, join substantive law sections, lawyer placement service, receive the *Lawyers Journal* and group medical insurance.

Mail completed application along with appropriate payment or credit card information to: Allegheny County Bar Association, Membership Department, 400 Koppers Building, 436 Seventh Avenue, Pittsburgh, PA 15219.

Law Student Annual Dues: \$30.00

All information on questionnaire MUST be fully completed. Please submit application typewritten or printed legibly.

Name: \_\_\_\_\_  
First Middle Initial Last

Local Address: \_\_\_\_\_  
Street Apartment #  
City State Zip Code County

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
Street Apartment #  
City State Zip Code County

Permanent Phone: ( ) \_\_\_\_\_ Permanent Fax: ( ) \_\_\_\_\_

Complete Name & Address of Undergraduate School \_\_\_\_\_

Undergraduate Degree and Year Earned \_\_\_\_\_

Complete Name & Address of Law School \_\_\_\_\_

Law School Year \_\_\_ 1st year \_\_\_ 2nd year \_\_\_ 3rd year \_\_\_ 4th year (night school) Anticipated date of law degree \_\_\_\_\_

I attest that the foregoing information is true and correct and that if approved for membership, I agree to subscribe to and agree to abide by the Constitution and By-laws of the Association.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**RESERVED FOR MEMBERSHIP DEPARTMENT**

Member Number \_\_\_\_\_ Date Approved/Rejected \_\_\_\_\_

SEE REVERSE FOR COMMITTEE, SECTION & PAYMENT INFORMATION

