

## STATEMENT OF 2009 - 2010 MEMBERSHIP DUES

Please enroll me as a member of the Western District of Wisconsin Bar Association for fiscal year 2009-2010. **Enclosed is my check for \$35.00 payable to the Western District of Wisconsin Bar Association.**

PLEASE PRINT OR TYPE

Full Name: \_\_\_\_\_

Firm Name/Gov Department: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Office Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

I am willing to volunteer:

- for pro bono appointment  
 to serve as an "Early Neutral Evaluator"

For service on the following association committee(s):

- |  |   |
|--|---|
| <input type="checkbox"/> Criminal Justice Section          | <input type="checkbox"/> Pro Se/Pro Bono                              |
| <input type="checkbox"/> Alternative Dispute Resolution    | <input type="checkbox"/> Communications                               |
| <input type="checkbox"/> Courthouse/Equipment & Facilities | <input type="checkbox"/> Court Rules, Practice<br>& Procedure Section |
| <input type="checkbox"/> Website                           |   |

Please make remittance payable to:  
WESTERN DISTRICT OF WISCONSIN BAR ASSOCIATION  
P.O. Box 44578  
Madison, WI 53744-4578

- WHY NOT PAY BY FIRM CHECK? When more than one member's dues are paid by firm check, please return all dues notices covered by your firm's check.