



Public Interest Law Section Membership Application

NAME: _____ FL BAR #: _____

FIRM NAME/ORGANIZATION: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

EMAIL ADDRESS: _____

PHONE: _____ FAX: _____

Please select the membership type below and return this form with your payment of:

_____ \$35.00 **Florida Bar Membership** (Item #8171001)

_____ \$20.00 **Affiliate Membership** (Item #8171002)

_____ \$20.00 **Law Student Membership** (Item #8171002)

Credit Card Fax this membership application with credit card information to 850-561-5825.

Name: _____ FL Bar #: _____

Billing Address: _____

City/State/Zip: _____

MasterCard

Visa

Discover

American Express

Name on Card: _____

Card Number: _____ Expiration Date: _____/_____
(Month/Year)

Signature: _____

Check

Mail this membership application with check payable to 'The Florida Bar' to:

The Public Interest Law Section

The Florida Bar

651 E. Jefferson St.

Tallahassee, FL 32399-2300