



MEMBERSHIP APPLICATION

An Affiliate of the National Bar Association

Member Profile (please print)

Name:	P#:	NBA ID #:
Title:		
Firm/Employer:		
Address:		
City, State, Zip:		
Phone:	Email:	
Referral Name:		

Membership Category

- ☐ Regular Member (\$100.00)
☐ Associate Member (law student, paralegal, legal assistant \$40.00)
☐ Continuing Sponsor (\$175.00)

Charitable Contribution

- ☐ I would like to make a tax-deductible contribution to the D. Augustus Straker Bar Foundation.
☐ Check enclosed made payable to **D. Augustus Straker Bar Foundation** in the amount of \$ _____

I am interested in working or serving as a liaison for the following committees:

- | | |
|--|--|
| ☐ Bar Passage Program | ☐ Membership |
| ☐ Communications/Newsletter/Website | ☐ MJK Oral Advocacy Competition |
| ☐ Community Action / Pro Bono Service Program | ☐ Nominations |
| ☐ Continuing Legal Education | ☐ Pipeline |
| ☐ Corporate Counsel Breakfast | ☐ Solo and Small Firm |
| ☐ Fundraising | ☐ Special Events |
| ☐ Holiday Reception | ☐ Straker Bar Foundation |
| ☐ Law Students Reception | ☐ Trailblazers Award & Scholarship Dinner |
| | ☐ Other (please specify): _____ |

Signature: _____

Date: _____

DO NOT mail cash.

Mail the completed form and payment to:

D. Augustus Straker Bar Association

22200 W. Eleven Mile Road # 357

Southfield, MI 48037-0357

www.strakerlaw.org, info@strakerlaw.org

Please retain a copy of this form for your records.