

**OLD DOMINION BAR ASSOCIATION, INC.
MEMBERSHIP FORM CY 2010**

This invoice is being sent to you as an opportunity to join the ODBA or to renew your membership.
The membership year is January 1st – December 31st.

Name: _____ Company: _____
 Address: _____ Phone #: _____
 City: _____ State: _____ Zip Code: _____
 Year Admitted to Bar: _____ Email: _____ Fax #: _____

DUES	(check which applies)	
_____	New Membership (admitted to bar less than 1 year)	FREE
_____	Associate Membership (A member of any state bar in the U.S. [other than VA] who is a resident of or employed in this state; or a law student or graduate, not yet admitted to practice)	\$25.00
_____	Regular Membership (admitted to bar 2 to 3 years)	\$50.00
_____	Regular Membership (admitted to bar more than 3 years)	\$125.00
_____	Judicial Membership	\$125.00
_____	Life Membership	\$1,500.00

Dues Payable Upon Receipt of This Invoice

*** Please return this form to the following address with check/money order made payable to the
"Old Dominion Bar Association":**

Old Dominion Bar Association
P.O. Box 12301
Richmond, VA 23241

TAX ID: 54-1435-908

Type of Practice:
 _____ Judge _____ Private _____ Government _____ Corporation _____ Law Professor
 Other: _____

Principle Areas of Practice:

_____ Administrative	_____ Domestic Relations	_____ Civil Rights Acts
_____ Admiralty	_____ Employee Benefits	_____ Civil Litigation
_____ Antitrust	_____ Environmental	_____ Worker's Comp.
_____ Banking/Financial	_____ Government/Lobbying	_____ Real Estate
_____ Bankruptcy	_____ Healthcare	_____ Securities
_____ Business	_____ Intellectual Property	_____ Taxation
_____ Commercial/Corporation	_____ International Law	_____ Wills, Trusts, Estates
_____ Criminal	_____ Labor/Employment	Other: _____

I do _____ do not _____ want the information contained on this Application published on the ODBA's Internet website.