



JOHNSON COUNTY BAR
association

Membership Application

Mr. Ms. First Name: _____ (MI) _____ Last: _____

Firm/Business Name (If Applicable): _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (____) _____ Fax: (____) _____ Nick Name: _____

E-Mail Address: _____

Supreme Court No: _____ *Date of Birth: _____ (*For internal demographic use only)

Law School: _____ Yr. Graduated: _____

Areas of Practice: _____

Johnson County Bar Association Dues (Please Check One Box):

Active Member \$ 195.00

Young Lawyer Member (Under age 36 or < 3 years in practice) \$ 170.00

Johnson County Bar Foundation Dues (Voluntary):

Member \$ 25.00

Fellow (\$1,000 paid in full or over a period of time < 10 years) \$ _____

Total Amount Enclosed \$ _____

*Membership Dues may be considered ordinary and necessary business deductions.
Only contributions to the Johnson County Bar Foundation are deductible as charitable contributions.*

Checks Payable to: Johnson County Bar Association

Mail to: 130 N. Cherry, Suite 202
Olathe, KS 66061

Questions: Contact Linda Coffee – (913) 780-5460
or lcoffee@jocobar.org