



Kentucky Bar Association

514 W Main St
Frankfort, Kentucky 40601-1812
Phone: 502-564-3795 Fax: 502-564-3225

www.kybar.org

KBA Form & Payment are available online at www.kybar.org. A 3.5% administrative fee will be charged for online payments.

Required Applicant Biographical Information

Full Name: _____ Birthdate: _____

Email: _____
Last First Middle Social Sec # (Last 4 digits only): XXX-XX- Gender: _____

Roster Address: _____
You will receive all mailings as well as your annual billing for bar dues at this address. Organization Suite #

Street Address _____

City County State ZIP Code

Residence County: _____

Pursuant to SCR 3.175(3) - If you list only a Post Office address for your roster address, you must also provide an address for service of process (physical address). *Failure to maintain a current address which allows for physical service of process with the Director may be prosecuted in the same manner as a violation of the Rules.

Service Address: _____
Street Address

City State ZIP Code

Business Phone: _____ Fax: _____ Home Phone: _____ Mobile Phone: _____

Undergraduate School: _____ Law School: _____

Other States Admitted: _____ Have you previously been admitted to practice law in KY? YES NO

Required Dues Payment - Payable to the Kentucky Bar Association

Annual Dues are prorated from the time you receive the oath as an attorney for your first fiscal year of membership. Please choose the correct amount from the Dues Chart below. Make check payable to the Kentucky Bar Association.

July	\$220.00	January	\$109.98
August	\$201.63	February	\$91.65
September	\$183.30	March	\$73.32
October	\$164.97	April	\$54.99
November	\$146.64	May	\$36.66- use only if you will be sworn in in May
December	\$128.31	June	\$18.33

Check# _____ Amount Paid: _____

To join the Young Lawyers Division add \$20 to your dues amount.

Optional Applicant Information

I consider myself (check all that apply) _____
___ American Indian/Alaska Native ___ Asian
___ Black/African American ___ Hispanic Latino
___ Native Hawaiian/Pacific Islander ___ White
___ Other _____

Are you a member of the US military or a veteran? YES NO Are you fluent in a second language? YES NO
 If so, please list below:

Are you willing to accept Pro Bono assignments? YES NO

Complete and return this form with payment to:

Kentucky Bar Association, Attn: Accounting Department, 514 W Main St, Frankfort, Kentucky 40601-1812