

**FAMILY LAW SECTION
of the Clark County Bar Association**

ENROLLMENT FORM FOR 2014-2015

Dues of **\$25.00** for the upcoming year are due on or before the second meeting. Please make your checks payable to the "CCBA" and note "Family Law Section".

MEMBER _____

ATTORNEY BAR NUMBER _____ NON-ATTORNEY _____

FIRM NAME _____

ADDRESS _____

PHONE _____ FAX _____

EMAIL _____

ATTORNEY MEMBERS:

I am a member of the Clark County Bar Association and a significant portion of my practice is devoted to the practice of family law.

I would like to participate in the opinion polls to be conducted by the Family Law Section of the Clark County Bar Association. Please include my name on the list of voting members.

I do not wish to participate in the opinion polls to be conducted by the Family Law Section of the Clark County Bar Association. Please DO NOT include my name on the list of voting members.

Signed _____

RETURN THIS FORM WITH YOUR DUES PAYMENT BEFORE THE FIRST MEETING TO:

**Clark County Bar Association
Family Law Section
500 W. 8th Street, Suite 65
Vancouver, WA 98660**