

Application for Membership

Huntsville-Madison County Bar Association, Inc.

205 Eastside Square
256-203-4900

Huntsville, AL 35801
office@huntsvillebar.org

Please complete this form by carefully printing or typing in the requested information. Mail the completed form, copy of current State of Alabama Bar license and membership fee to the Executive Director of the Huntsville-Madison County Bar Association, Inc. at the address listed above.

Alabama State Bar License Number	Date Admitted to Alabama State Bar
Full Name	
Employer Street Address or P.O. Box City, State, Zip Code	
Office Manager Email for Billing	
Office Telephone	Cell Phone for CroNote Notification
E-mail address	
Undergraduate School and Major	
Law Degree Received from (name of law school)	Year
Location of Law School (city, state)	
Home Address and Spouse Name if applicable (For internal use only)	

I certify that I am a member in good standing of the Alabama State Bar, and I agree to abide by the constitution and bylaws of the Huntsville-Madison County Bar Association, Inc.

Date

Signature of Applicant

We, the undersigned, as members of the Huntsville-Madison County Bar Association, Inc., sponsor this applicant for membership in the Huntsville-Madison County Bar Association, Inc.

Printed or Typed Name of Sponsor, Firm, Address For HMCBA office use only: <input type="checkbox"/> Sponsor in good standing with HMCBA • Date _____ Initial _____	Signature of Sponsor and Date Signed
Printed or Typed Name of Sponsor, Firm, Address For HMCBA office use only: <input type="checkbox"/> Sponsor in good standing with HMCBA • Date _____ Initial _____	Signature of Sponsor and Date Signed

For use by the Huntsville-Madison County Bar Association, Inc.:

Applicant is in good standing with the Alabama State Bar.

Date

Signature of Member of Membership Committee