

ADVOCATES SOCIETY
MEMBERSHIP APPLICATION

I, _____, hereby make application for (judge, attorney, or student (circle one)) membership in the Advocates Society, Chicago, Illinois, and if accepted, agree to abide by the Constitution and By-Laws thereof.

Firm or Employer

Office Address (Number - Street - Suite)

City State Zip Code Office Telephone No.

Home Address (Number - Street - Apt.)

City State Zip Code Home Telephone No.

E-Mail Address: _____

Preferred Mailing Address (check one): office home

Preferred address to be published to Advocates members: office home none

Year of bar admission Law school/Year graduated

Area(s) of Practice: _____

I certify that I am of Polish descent or affinity, or I am married to someone of Polish descent or affinity, and that I am licensed to practice law in the State of Illinois, or am a current law student.

Applicant's Signature: _____ Date: _____

Sponsor's Signatures: 1. _____ Date: _____

2. _____ Date: _____

Please include payment of dues with your application. Checks are to be made payable to Advocates Society.

Schedule of Dues

\$125.00	Members who have been admitted to the Bar for five (5) years or more.
\$ 75.00	Members who have been admitted to the Bar for less than (5) years.
\$ 30.00	Law student members.

Amount enclosed: _____.

Please mail all applications with dues payment to Advocates Society, P.O. Box 641883, Chicago, Illinois 60664-1883. Thank you for your interest in our organization. If you have any questions, please feel free to contact Megan Kaszubinski at (312) 744-4038.