



**STATE BAR OF TEXAS**  
**APPELLATE SECTION**  
**MEMBERSHIP APPLICATION FORM**  
*(Bar Year is from June 1, 2016 – May 31, 2017)*  
*(Please Print Legibly)*

**DUES:**

**Attorney Dues: \$25.00**

**Law Students and New Lawyers**  
**(licensed 2 years or less): Dues waived**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Facsimile: \_\_\_\_\_

Bar Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Method of Payment:**

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**Please return to:**  
**State Bar of Texas**  
**Attn: Membership Department**  
**P.O. Box 12487, Austin, Texas 78711-2487**  
**Fax: (512) 427-4424**