



Georgia Defense Lawyers Association Membership Application

Full Name: _____ State Bar No: _____

Preferred First Name/Nickname: _____

Firm Name: _____

Street Address: _____

City, State, Zip: _____

Tel: ____ - ____ - _____

Fax: ____ - ____ - _____

E-Mail: _____

Firm Web site: _____

Date Admitted to Georgia Bar: _____ Date Began Practice: _____

Date Admitted to Any Other State Bar(s) – List Year/State: _____

Number of years with present affiliation: _____

Number of individuals in your firm presently members of GDLA: _____

Who (if anyone) referred you to the GDLA? _____

Personal Information (NOTE: Personal data is available only to the GDLA Executive Director.)

Birthdate: _____ Spouse's First Name (and Last Name if different from yours): _____

Home Address: _____ Home Tel: ____ - ____ - _____

To Apply for Active Membership

I certify that I am a lawyer in private practice and I am substantially engaged in litigation, primarily for the defense, in the State of Georgia and I am a member in good standing of the State Bar of Georgia.

_____/_____/_____ (Date) (Signature of Applicant)

To Apply for Associate Membership

I certify that I am a lawyer and I am employed by and actively engaged on a full-time basis in the claims work of a company doing business in the State of Georgia.

_____/_____/_____ (Date) (Signature of Applicant)

Mail completed form and check to: Warner S. Fox, GDLA Membership Chair, Hawkins & Parnell, 4000 SunTrust Plaza, 303 Peachtree Street, N.E. Atlanta, GA 30308-3243. Checks should be made payable to GDLA for \$300.00, which includes the application fee of \$100.00 and one year's dues. If you have been admitted to any bar and in practice less than five years, the fee is \$225.00, which includes the application fee and one year's dues. Applications and dues received after Fall Board meeting will be prorated and all overages shall be refunded. For further information, call 404.816.9455. Upon approval for membership, you will be notified.