

BROWARD COUNTY HISPANIC BAR ASSOCIATION
PO BOX 350248 Ft. Lauderdale. Florida. 33335

MEMBERSHIP APPLICATION

Attorney Law Student Educator Business Member
 Membership Renewal New Membership

Please print or type:

Name: _____ Firm: _____

Address: _____ Suite _____

City: _____ State: _____ Zip: _____

Phone No.: _____ Fax No.: _____ e-mail address: _____

Area(s) of practice: _____

FL Bar No.: _____ Year admitted to FL Bar: _____

FL Board or other certification in: _____

Member of a Florida Bar Grievance Committee? _____ Florida Bar Committee _____

Admitted to other state Bar : _____

Are you able to assist clients who speak **only** Spanish? _____

Are you Supreme Court of Florida Certified: Family Law Mediator _____ Civil Mediator _____ Arbitrator _____

Are you certified by the U.S. District Court of the Southern District of Florida as Mediator: _____

Are you a currently Certified Florida Guardian Ad Litem? _____

Are you available for court appointment in: Criminal matters? _____ As Guardian in foreclosure matters?

Are you currently a member of the Broward County Bar Association? _____ Other Voluntary Bar _____

MEETINGS HELD ON THE 2ND THURSDAY OF EVERY MONTH
AT THE TOWER CLUB FOR A LUNCHEON BUFFET - COST: \$25.00

BCHBA's fiscal year is July 1 through June 30

MEMBERSHIP Dues \$75.00

Assistant State Attorneys, Public Defenders and Attorney General \$50.00

Law Student Members \$ 10.00

Payment: My check made payable to **BCHBA** is enclosed.

Check No.: _____ Date: _____

Send your application and payment to:

PO BOX 350248
Ft. Lauderdale. Florida. 33335

Questions? Please direct all questions to carmen@velasquez-law.com

Clear all fields