ORANGE COUNTY BAR ASSOCIATION 2018 Associate Section Membership Application



The Orange County Bar Association invites you to join any of the sections listed below as an Associate Section Member. Associate Section membership is open to Non-Attorneys only. For each Section that you belong to as an Associate Section Member, you will be allowed to participate in section activities at section member prices and receive notices of section meetings. Please note that Associate Section Members are NOT members of the Orange County Bar Association, as only law students, judges, and attorneys are eligible for OCBA Membership. Therefore, Associate Section Members do not receive any other association benefits or member pricing at OCBA events, and cannot vote in any OCBA elections, hold office in a section, or have access to any section listserv.

Only those OCBA Sections who currently allow Associate Section Membership are listed below.

PLEASE CHECK THE APPROPRIATE BOX FOR THE SECTION(S) YOU WISH TO JOIN FOR 2018:

\$50.00 PER SECTION

☐ Insurance Law

☐ International Law

☐ Real Estate Law

☐ Tax Law

☐ Tort & Trial

☐ Social Security Law

☐ Labor & Employment Law

☐ Solo Practitioner/Small Firm

☐ Intellectual Property & Technology Law

☐ Alternative Dispute Resolution

☐ Commercial Law & Bankruptcy

☐ Conservatorship, Guardianship,

☐ Entertainment, Sports & Marketing Law

& Protective Proceedings

☐ Business & Corporate Law

☐ Banking & Lending

☐ Business Litigation

☐ Environmental Law

☐ Elder Law

☐ Environmental Law	☐ Trusts & Estates			
☐ Health Care Law		□ Wor	☐ Workers' Compensation	
Mail or fax this complete	ed form witl	h your che	ck or credit card information to:	
	P.O. Box 6130	nty Bar Assoc O ach, CA 92658		
	Fax: (949) 44	0-6710		
Name:		Company:		
Street Address:	City:		State/ZIP Code:	
Phone: ()		Fax: ()	
E-mail:		By providing	your email address, you agree to allow the OCBA to email you regarding relevant OCBA information.	
Type of Business:				
☐ I certify that I am a non-lawyer: (signatu	re)			
Payment Amount: \$			(section dues are \$50.00 per section.)	
☐ Check enclosed payable to OCBA or				
□ Visa/Mastercard/AMEX/Discover #:			Exp. Date:	
Cardholder Name:		Signature:	:	
For further in	nformation pl	ease call (94	9) 440-6700, ext. 384	
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