

ORANGE COUNTY BAR ASSOCIATION

TO: COMMITTEE ON ADMISSIONS, ORANGE COUNTY BAR ASSOCIATION

I hereby apply for membership in the Orange County Bar Association:

FULL NAME: _____ E-MAIL ADDRESS: _____

FIRM NAME: _____ WEBSITE: _____

BUSINESS ADDRESS: _____ FAX NUMBER: _____

_____ PHONE NUMBER: _____

RESIDENCE ADDRESS: _____ PHONE NUMBER: _____

PREVIOUS LEGAL EMPLOYMENT OR OTHER RELEVANT DATA:

DATE AND DEPT. OF ADMISSION TO NYS BAR: _____

LAW SCHOOL: _____ DEGREE & DATE: _____

OTHER LAW OR POST GRADUATE DEGREES: _____

UNDERGRADUATE SCHOOL DEGREES & DATES: _____

ADMITTED IN OTHER STATE(S) _____ YEAR: _____

I AM INTERESTED IN SERVING THE BAR AND/OR THE PUBLIC ON THE FOLLOWING COMMITTEES:

1) _____ 2) _____ 3) _____

AFFIRMATION OF ADMISSION

The undersigned attorney affirms that I am presently admitted to practice law in the State of New York and am in good standing.

Dated: _____

Please mail to the Chairman of the Admissions Committee: Louis H. Sherwin Esq., P O Box 310, Middletown, NY 10904

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