

**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  
10940  
845-294-8222  
orangecountybarassociation.org  
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