

**THE FLORIDA BAR
APPLICATION FOR AFFILIATE MEMBERSHIP
ADMINISTRATIVE LAW SECTION
(Item # 8011002)**

NAME: _____

FIRM NAME: _____

OFFICE ADDRESS: _____

CITY/STATE: _____ ZIP CODE: _____

OFFICE PHONE: () _____ E-MAIL ADDRESS: _____

PROFESSIONAL SPECIALTY(IES): _____

WHAT AGENCIES DO YOU PRIMARILY WORK WITH?

WHAT LEGAL AREAS ARE YOU MOST INTERESTED IN?

FROM THE STANDPOINT OF YOUR PROFESSION, WHAT ISSUES INVOLVED IN ADMINISTRATIVE LAW AND PROCEDURE AND STATE AGENCY PRACTICE ARE MOST IMPORTANT?

I understand that all privileges accorded to members of the section are accorded affiliates, except that affiliates may not advertise their status in any way, nor vote, or hold office in the Section or participate in the selection of Executive Council members or officers.

My resume is enclosed.

SIGNATURE: _____ DATE: _____

Note: Membership dues are \$25. Membership in the section will expire June 30. The Florida Bar dues structure does not provide for prorated dues. Your application, resume and check should be mailed to Jackie Werndli, Section Administrator, The Florida Bar, 651 E. Jefferson St., Tallahassee, FL 32399-2300.