



2015 -2016 MEMBERSHIP / RENEWAL APPLICATION

NAME: _____	Please check one box: <input type="checkbox"/> Yes, I will attend the 2015 District Conference and CLE. <input type="checkbox"/> I will not be attending the 2015 District Conference and CLE.
EMAIL: _____	
PHONE & FAX: _____	
FIRM & ADDRESS: _____	
CITY, STATE & ZIP CODE: _____	
STATE OF ADMISSION & BAR NUMBER: _____	

Annual Membership (District Conference Included): \$75.00

Additional Donation to District STEP Program Account: _____
(\$25 suggested)

Total Amount Remitted: _____

Make Payment to: Federal Bar Association, E.D.
WA.

Return with Payment to: Matt Campbell, FBA Treasurer
10 North Post Street, Suite 700
Spokane, Washington 99201