

## INDIVIDUAL MEMBERSHIP APPLICATION

Please provide the information requested below and return your completed membership application and dues payment to: **NLADA**, **PO Box 79083**, **Baltimore**, **MD 21279-0083**.

Questions? Call us at (202) 452-0620, ext. 215 or ext. 234 E-mail: membership@nlada.org Fax: (202) 872-1031

Name	TON	•		
Company				
	ndicate your affiliation: gs and publications you will receive f		☐ Defender	☐ Both
Address				
City		State	Zip	
Email		_ Work Phone		
Please check the box corres you are applying:  Sustaining Member Individual Attorney	, (,,,	for which nployee) ployee)	your voting classification you will be eligible to vote and Policy Group elect Public Member Defender Indiv. Me	t you check the box corresponding to on. This determines what candidates ote for in the annual NLADA Board tions.
☐ Advocacy & Support Sec ☐ Client Section - \$5 (option ☐ Latino Advocates Section ☐ National Alliance of Indige	- \$25	ection - \$10  Bl. ction - \$10  T  T ion - \$5  S rmerly Defender 1	ack Public Defenders Asechnology Section - \$15 tudent Legal Services S rainers Section - \$24	ssociation (BPDA) - \$50  Farmworker Law Section - \$5
ACCD Section membership				regardless of title) of all types of indiger offices within state systems.
PAYMENT INFORMATION *		MI	METHOD OF PAYMENT	
Membership Dues	\$		<ul> <li>Submit a <u>Check</u> with this form to:</li> <li>NLADA</li> <li>PO Box 79083</li> <li>Baltimore, MD 21279-0083</li> </ul>	
Section Dues Enclosed	\$			
Tax-Deductible Donation	\$	<ul><li>Pay Online at <u>nlada.org/eweb</u></li></ul>		
Total Amount Enclosed \$  * NLADA is a 501(c)(3) non-profit organization. Federal Tax ID #: 36-		<u>onl</u> creo	* Credit Card payments must be submitted through our secure online system at nlada.org/eweb. NLADA does not accept credit card payments through mail, email, or fax.	