

FLORIDA ASSOCIATION OF LGBT LAWYERS & ALLIES

2017 Membership Application

The FALLA membership year runs January 1 – December 31.

Please type or print

APPLICANT INFORMATION

First Name	M.I.	Last Name	Date of Birth
Bar Number / State / Admission Date		Bar Number / State / Admission Date	
Employer		Title	
Areas of Practice			

TELEPHONE

Office	Home	Mobile
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BUSINESS ADDRESS

Street / Suite/Floor	City	State	Zip
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HOME ADDRESS

Street / Apt/Unit	City	State	Zip
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E-MAIL

Work	Home
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LAW SCHOOL

Name	Graduation Date
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<p>TYPE OF MEMBERSHIP <i>Please check one.</i></p> <p><input type="checkbox"/> Private Attorney \$75.00</p> <p><input type="checkbox"/> Judges, non-profit attorneys, government attorneys \$50.00</p> <p><input type="checkbox"/> Affiliates (paralegals, legal support service providers) \$25.00</p> <p><input type="checkbox"/> Students \$10.00</p> <p style="text-align: right;">AMOUNT DUE \$ _____</p>	<p>PAYMENT INFORMATION</p> <p><input type="checkbox"/> Check (<i>made payable to Florida Association of LGBT Lawyers & Allies, or FALLA</i>)</p> <p><input type="checkbox"/> Credit/Debit Card</p> <p style="margin-left: 20px;"><input type="checkbox"/> Visa <input type="checkbox"/> MasterCard</p> <p style="margin-left: 20px;"><input type="checkbox"/> American Express <input type="checkbox"/> Discover</p> <p>Card No. _____</p> <p>Exp Date / Sec Code _____</p> <p>Name _____</p> <p>Phone _____</p> <p>Billing Address _____</p> <p>City, State, Zip _____</p> <p>Signature _____</p>
<p>RETURN THIS APPLICATION WITH PAYMENT TO:</p> <p>Florida Association of LGBT Lawyers & Allies ATTN: Membership c/o Heuler-Wakeman Law Group, P.L. 1677 Mahan Center Boulevard Tallahassee, FL 32308-5454 850.421.2400 • Fax: 850.421.2403 E-mail: mary@hwelderlaw.com</p>	

While Florida Association of LGBT Lawyers & Allies dues are not tax deductible as charitable contributions for federal income tax purposes, they may be deductible as ordinary and necessary business expenses, subject to restrictions imposed by law. Please consult with your tax advisor.