



RICHMOND COUNTY BAR ASSOCIATION
25 HYATT STREET - STE 203 STATEN ISLAND NY 10301
718-442-4500
RCBAWEB@GMAIL.COM

APPLICATION FOR REGULAR MEMBERSHIP

Must be accompanied by a check for one year's dues: \$200.00
___ Voluntary Contribution \$5.00

TOTAL: \$200.00 or \$205.00

To the Committee on Admission
Richmond County Bar Association
25 Hyatt Street
Staten Island, NY 10301

I hereby apply for membership in the Richmond County Bar Association

(Print Full Name) (Date of Birth)

Residence_____

Home Phone_____

Office_____

Office Phone_____

Email Address:_____

Where shall we send your mail (home or office)?_____

Admitted to Practice on the ___ day of _____ in the year____ by the ____
Judicial Dept.

College_____ Law School_____

Please list all degrees_____

x _____
(Signature of Applicant)

Dated _____ 20__

\$130.00 for applicants admitted to practice for less than 5 years. Newly admitted
lawyers (within 1 year of admittance) dues waived.