

**Member Dues Card**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

Year Admitted to the Mass. Bar \_\_\_\_\_

- Renewing Member       New Member

Would you like your website to be linked to the PCBA "member website" page?

- Yes     No (See our website at [www.plymouthcountybar.com](http://www.plymouthcountybar.com))

IF YES WEBSITE ADDRESS \_\_\_\_\_

**Please check one of the boxes below:**

- I have previously been a member of the Plymouth County Bar Association  
 I am applying for membership of the Plymouth County Bar Association for the first time  
I hereby apply for membership/renewal of *my* membership in the Plymouth County Bar Association and I hereby certify that my membership in any other Bar Association or right to practice law has never been suspended or revoked and I have never resigned from the practice of law in another jurisdiction.

\_\_\_\_\_  
Signature (required)

Please return your application with your membership dues\*  
Make check payable to the Plymouth County Bar Association, Inc. and mail to: PCBA, P. O. Box 7303,  
Brockton, MA 02303-7303

**\*Dues**

- Licensed to practice more than 3 years ..... \$75.00  
Newly admitted licensed to practice in Massachusetts 3' years or less ..... \$45.00  
I am over the age of 70 or I have been in practice for 50 years or more ..... No fee due