

LPLC Associate Membership 2011-2012 Enrollment Form



Yes, I want to enroll in the Lawyers' Professional Liability Consortium. The fiscal year runs from September 1, 2011 to August 31, 2012. Please enroll me as a member at the following level:

- \$775 **INDIVIDUAL MEMBER – MEMBER BENEFITS ARE NONTRANSFERABLE**
Includes one eMembership and one registration at each of the two conferences. (Fall 2011 and Spring 2012). PLEASE COMPLETE PART A.
- \$1,650 **ORGANIZATIONAL MEMBER – BUY FLEXIBILITY!**
Member benefits for **any two** individuals from your organization. Includes two eMemberships and two individuals per conference (Fall 2011 and Spring 2012). Individuals using these benefits may change throughout the year. PLEASE COMPLETE PART B.
- \$25 **EMEMBERSHIP**
Access to LPL eAdvisory, Members Only website, and News Flashes. No Conference Benefit. PLEASE COMPLETE PART A.

PART A – INDIVIDUAL MEMBERSHIP (\$775)

Primary/Billing Contact Information

Name: _____

Company: _____

Address: _____

City, State, Zip: _____

Phone: _____

Fax: _____

e-mail: _____

PART B – ORGANIZATIONAL MEMBERSHIP (\$1,650)

1. Primary/Billing Contact Information

Name: _____

Company: _____

Address: _____

City, State, Zip: _____

Phone: _____

Fax: _____

e-mail: _____

2. Second eMembership

Name: _____

Email: _____

Phone: _____

Payment Information

Check enclosed (Make checks payable to the American Bar Association)

Credit Card Visa Master Card American Express

Account Number: _____ Exp. _____

Name on Card: _____

Signature: _____

Individual - \$775 Organizational - \$1,650 eMembership - \$25

Total: \$ _____

Send your payment and enrollment forms to:
American Bar Association, Attn: Meghan Monahan
321 North Clark Street, Chicago, IL 60654
Or fax to 312/988-5483