

WOMEN ATTORNEYS ASSOCIATION OF TOPEKA

**MEMBERSHIP APPLICATION
2011-2012**

NAME: _____

FIRM/AGENCY _____ **TITLE:** _____

Mailing Address: _____ **City/ST/Zip:** _____

_____ Check here if you do NOT want your address listed in directory or used for related mailings

Phone: _____ **Fax:** _____

Email Address: _____

Practice Areas: _____

Undergraduate Institution: _____ **Degree:** ____ **Year:** ____

Law School _____ **Year:** ____

Annual Dues (July 1, 2011 – June 30, 2012)

New Admittees 2011, free _____ Admitted to Bar 1-3 Years, \$20 _____
Admitted to bar 4+ Years, \$30 _____

Committee Preferences

I am interested in serving on one of the following committees:

Membership _____ Bylaws _____ Social _____ Young lawyers _____

Program _____ Newsletter _____ Public Relations _____ Website _____

RETURN TO:

WAAT

P O BOX 2483

TOPEKA, KS 66601