

SOUTH ORANGE COUNTY BAR ASSOCIATION

2015-2016 Membership Application

Membership dues for
Invoice period 9/1/2015 to 8/31/2016

| | |
|---------------------------|-----------------|
| Name: | Bar No.: |
| Firm Name: | |
| Address: | |
| City: | Zip: |
| Phone: () | |
| E-mail: | |
| Website: | |
| Areas of Practice: | |

YEARLY DUES FOR 2014-2015:

- \$ 75 or
- \$ 25 (with proof of membership to the Orange County Bar Association for year 2014-2015)

Enclose a check made **payable to S.O.C.B.A.** for current membership dues.

Dated: _____ Signed: _____

Send Application with your check to:

Mr. Joe Torri
Law Office of Joseph Tori
24001 Calle De La Magdalena
P.O. Box 2827
Laguna Hills, CA 92654
(866) 630-5757