

ATTORNEY MEMBERSHIP FORM

Spring 2020 - Spring 2021 Please remit this form along with payment in the form of check or money order to:

National Native American Bar Association PO Box 11145, Tempe, AZ 85284

www.nativeamericanbar.org

New or Renewal:	□ New	□Renewal - <i>If renewing, only</i>	name, email & updated information are needed.
Name:		·	
Tribal Affiliation:			
Areas of Practice:			
Bar Membership(s)):		
Tribal:			
State:			
Other:			
Mailing Address:			
Phone:			
Email:			
Website:			
Please check the a	ppropriat	e membership category:	
who are recogn Hawaiian, and members shall privileges, and Associate Mem who are recogn Hawaiian, who Associate men rights, privileges and pr	mized by the whole who have a large of the whole with the whole who have regimbers shall ges, and dutership: \$7.1 pay dues, a duties attentiate box if you have a lattential was a lattential was a lattential whole who have informational was a lattential was a la	neir Indian community of residence graduated from a school of law of and shall be eligible to vote and endant to NNABA membership. \$75.00 per year. All persons who neir Indian community of residence ular assignments or duties as adverted as a strength as a strength of the strength of	to eligible for regular or associate membership. Special hold office in the NNABA, and shall have all other rights, and the NNABA Membership Directory. The NNABA Foundation, in the amount of \$
Signature		Printed Name	 Date