



Mobile phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

State or tribal bar membership(s) and membership number(s): \_\_\_\_\_

\_\_\_\_\_

State or tribal bar disciplinary history: \_\_\_\_\_

\_\_\_\_\_

Practice area(s): \_\_\_\_\_

\_\_\_\_\_

Malpractice insurance provider: \_\_\_\_\_

Name to appear on membership card: \_\_\_\_\_

Would you like your contact information and practice area(s) to be published on the Intertribal Court of Southern California's website?  Yes  No

Would you like your contact information and practice area(s) to be provided to Intertribal Court of Southern California parties in need of *pro bono* legal services?  Yes  No

If yes, you will be entitled to a \$50.00 reduction in the Southern California Tribal Bar Association membership fee, and your contact information and practice area(s) will be published on the Intertribal Court of Southern California's website.

### **Applicant Signature**

As an applicant for renewal of membership in the Southern California Tribal Bar Association, I am aware that the Chief Judge of the Intertribal Court of Southern California may make inquiries as to my qualifications.

I have read and understand the information herein, and affirm that it is accurate and complete to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
**FOR COURT USE ONLY**  
\_\_\_\_\_

Approved  Not approved

Membership number: \_\_\_\_\_

Court clerk: \_\_\_\_\_

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Court Administrator  
Intertribal Court of Southern California

\_\_\_\_\_  
Date