



*Friends Application*  
**COLUMBIAN LAWYERS  
ASSOCIATION**  
MEMBERSHIP / FRIENDS COMMITTEE  
8 East 69<sup>th</sup> Street  
New York, NY 10021  
Tel. (212) 661-1661



*I wish to join the Friends of Columbian Lawyers Association.*

<b>Name:</b>	<b>Send Mail to:</b> <input type="checkbox"/> Office <input type="checkbox"/> Home
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<b>Title:</b>
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<b>Company Contact Information:</b>
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<b>Phone:</b>	<b>Fax:</b>	<b>E-mail:</b>
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<b>Home Contact Information:</b>
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<b>Phone:</b>	<b>Fax:</b>	<b>E-mail:</b>
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I would be interested in participating in a Committee <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Committee:
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**Annual Fee Schedule**  
*(Please remit payment with your Application)*

<input type="checkbox"/> \$150.00 - Friends of Columbian Lawyers*
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*\* I understand that joining the Friends of Columbian Lawyers entitles me to receive the Association Monthly Newsletter, and to receive Member Discount at Monthly CLE Dinner and other programs.*

<b>Sponsor:</b>	<b>Date:</b>
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<b>Signature of Applicant:</b>
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*Please mail this form along with your check payable to:* **Columbian Lawyers Association**  
**Membership / Friends Committee**  
**Columbian Lawyers Association**  
**8 East 69<sup>th</sup> Street**  
**New York, NY 10021**

**For Office Use Only**

<b>Membership / Friends Committee Action:</b> _____
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<b>Dated:</b> _____ <b>Membership / Friends Committee:</b> _____
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