

# ASIAN PACIFIC AMERICAN BAR ASSOCIATION OF CENTRAL OHIO

## MEMBERSHIP APPLICATION (2018)

Thank you for your interest in joining APABA-CO. Please complete this form, and return it to: APABA-CO, Attn: Kinal Patel, P.O. BOX 2885, Columbus, Ohio 43216 or for further information email Kinal at [kinal.patel@squirepb.com](mailto:kinal.patel@squirepb.com)

---

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Please fill out the form completely.

Position/Title: \_\_\_\_\_

Employer: \_\_\_\_\_

Home Address: \_\_\_\_\_

Work Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Fax: \_\_\_\_\_

**Mail:** Please send all APABA-related mail to my (check one): \_\_\_\_\_ WORK \_\_\_\_\_ HOME

**Directory:** In the APABA directory, please publish (check one):

\_\_\_\_\_ WORK INFORMATION ONLY

\_\_\_\_\_ ALL INFORMATION

\_\_\_\_\_ HOME INFORMATION ONLY

\_\_\_\_\_ NO INFORMATION

## EDUCATION, BAR ADMISSIONS, PRACTICE AREAS

Undergraduate: \_\_\_\_\_

Year Graduated: \_\_\_\_\_ Degree: \_\_\_\_\_

Law School: \_\_\_\_\_

Year Graduated: \_\_\_\_\_ Degree: \_\_\_\_\_

Bar(s) Admitted: \_\_\_\_\_ Year \_\_\_\_\_ Year \_\_\_\_\_ Year \_\_\_\_\_

Practice Type: \_\_\_\_\_ Firm \_\_\_\_\_ Federal Government \_\_\_\_\_ State/Local Government  
\_\_\_\_\_ Judicial \_\_\_\_\_ Solo \_\_\_\_\_ Academic \_\_\_\_\_ Corporate/In-House Counsel  
\_\_\_\_\_ Law Student \_\_\_\_\_ Other (specify): \_\_\_\_\_

## COMMITTEE SELECTION

I am interested in participating on the following committee(s):

\_\_\_\_\_ Communications \_\_\_\_\_ Event Planning \_\_\_\_\_ Membership \_\_\_\_\_ Community Service \_\_\_\_\_ Scholarship

## ANNUAL MEMBERSHIP DUES (valid January-December 2018)

Private Firm/Corporate Counsel Members:	\$ 20.00	\$ _____
Government/Public Interest/Judicial/Academic Sector Members:	\$ 20.00	\$ _____
Law Student / L.L.M. Student Members:	No Fee	\$ _____

TOTAL PAYMENT ENCLOSED: \$ \_\_\_\_\_

---