

# LEXINGTON COUNTY BAR ASSOCIATION, INC.

Post Office Box 1296 • Lexington, South Carolina 29071

## NEW MEMBER INFORMATION FOR 2017

Name of Applicant: \_\_\_\_\_

Firm or Company: \_\_\_\_\_

Business Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Number of Attorneys in Firm or Company: \_\_\_\_\_

Business Phone: \_\_\_\_\_

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

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

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

SC State Bar Number: \_\_\_\_\_

Other State Bar Admission: \_\_\_\_\_

County of Residence: \_\_\_\_\_

By signing this form, I do hereby make application to the LCBA for membership and, in making such application, I certify that I am validly licensed to practice law and that all information provided by me in this application is true and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*If you have any questions regarding membership, please contact  
Jesse Near, President, at (803) 237-7195  
or Nancy Lipski, Treasurer, at (803) 951-2772*

*Please mail this form and a check for \$75.00 to  
LCBA Post Office Box 1296, Lexington, SC 29071*