

Society of Family Lawyers

A NOT FOR PROFIT CORPORATION

MEMBERSHIP APPLICATION

I would like to join the Society of Family Lawyers. I am licensed to practice law in the State of Wisconsin. I have enclosed my check for \$55.00 for the 2017–18 membership year with this application.

My name and contact information are as follows:

Name: _____

Firm: _____

Address: _____

Phone: _____

Fax: _____

E-mail: _____

Firm Web Site: _____

The above contact information **will** be listed on the SOFL website, **unless** you ask us **not** to list some or all of it. To opt out of the listing, check () what we should **not** disclose:

Please do **not list** my name address phone fax e-mail web site

Make your \$55.00 check payable to “Society of Family Lawyers” and mail to:

Society of Family Lawyers
c/o Attorney Gregg E. Bridge
10150 W. National Ave., Suite 305
Milwaukee, WI 53227