



2009 MEMBERSHIP RENEWAL NOTICE

To be completed by renewing member:

Name: _____

Bar No: _____

My contact information has not changed: _____

Please note my new contact information:

Membership Rates:

Litigation Department Group Rate (all litigators in local office must renew or join)	_____ x \$75.00 = \$_____
Individual Membership	_____ \$90.00
TOTAL	\$_____

Payment Method:

AMOUNT OF CHECK: _____ or CHARGE _____

CREDIT CARD PAYMENTS ACCEPTED ONLINE AT WWW.ABTL.ORG (Please fill out form completely and attach online receipt when returning.)

SIGNATURE: _____
