



# National Association of Criminal Defense Lawyers Membership Application

1660 L Street, NW 12<sup>th</sup> Floor, Washington, DC 20036  
 Membership Hotline: 202-872-4001 or assist@nacdl.org  
**Join NACDL on our website at [www.nacdl.org/jointoday](http://www.nacdl.org/jointoday)**

**Yes!** Sign me up as a member of NACDL and start my subscription to *The Champion* today!  
 I qualify for membership in the following category (please check one)

Membership Categories:	Annual Dues:	Membership Categories:	Annual Dues:
<input type="checkbox"/> Regular	\$349	<input type="checkbox"/> Law Student (JD Candidates only)	\$ 65
<input type="checkbox"/> New Lawyer *	\$199	<input type="checkbox"/> Associate †	\$ 199
<input type="checkbox"/> Public Defender **	\$145	<input type="checkbox"/> International	\$ 199
<input type="checkbox"/> Law Professor	\$185	<input type="checkbox"/> Sustaining	\$ 515
<input type="checkbox"/> Judge	\$209	<input type="checkbox"/> President's Club	\$ 739
<input type="checkbox"/> Military	\$185	<input type="checkbox"/> Life Member ‡	\$ 6,500

\* New Lawyer: Members of the bar less than 6 years

\*\* Public Defender: Full-time attorney at **government PD office** or **nonprofit legal services agency**

† Associate: Non-lawyers who assist in the defense of criminal cases; consultants, investigators etc.

‡ Life Member: One-time contribution, or 5 installments over 5 consecutive years.

*Prosecutors are not eligible to become NACDL members nor to participate in CLE seminars*

Applicant Name: \_\_\_\_\_ Referred By: \_\_\_\_\_  
 Firm Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Are you an attorney?  Yes  No

State Bar(s) Bar number(s) and Admission Year(s) \_\_\_\_\_

- I certify that I meet the stated criteria for the membership category to which I am applying, and that I am a person of integrity and good moral character.
- Attorneys:** I am a member of the bar in good standing and I am not subject to suspension or disbarment in any jurisdiction. I understand that prosecutors are not eligible to be NACDL members.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Payment Information:

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_  
 Billing Address (If different from above) \_\_\_\_\_

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Signature

**Join Online: [www.nacdl.org/join](http://www.nacdl.org/join)**

**Return by FAX to: (202) 872-4002 Attn: NACDL Membership Director**  
**Or Mail with Check Payable to NACDL: 1660 L St. NW, 12<sup>th</sup> Fl. Washington, DC 20036**  
**Please do NOT send credit card information by email**