

HARFORD COUNTY BAR ASSOCIATION
APPLICATION FOR ADMISSION

Name: _____

Home Address: _____

Home Telephone: _____ City/Town _____ State _____ Date of Birth: _____

Harford County Resident: Yes or No (circle one) Since: _____

Legal Education: _____

Date of Graduation: _____

Admitted By The Court of Appeals of Maryland on: _____

Business Address: _____

Business Telephone: _____ Fax No. _____

Email address: _____

Presently practicing law in: _____

Active member in what other legal association: _____

Are you a member in Good Standing with the Maryland State Bar Association - Yes or No
(circle one)

Additional information you feel would be helpful, including employment other than Practice of Law: _____

I Practice Law (check one) FULL TIME _____ PART TIME _____ in Harford County.

I devote _____ hours per week to the Practice of Law in this Harford County office.

_____ I am currently retired or semi-retired from the practice of law.

My office is/was located in _____ County.

_____ I am currently disabled from the practice of law.

My office is/was located in _____ County.

Signature of Applicant

Date