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I would like to join the Virginia Women Attorneys Association

Date: _____

Chapter: Abingdon/SWVA Fredericksburg Hampton Roads Loudoun
(Choose one Northern Virginia Prince William Richmond Roanoke
Chapter only) At Large

Regions: Charlottesville-Lynchburg

Name _____

Firm/Organization _____

Mailing Address _____

City State ZIP _____

Telephone: _____

Email: (please write legibly!) _____

Date first admitted to any bar(mm/dd/yyyy) _____

Current Bar Admissions _____

What Jurisdictions/Circuits do you practice in? _____

Main areas of practice: _____

Referred by _____

Membership Categories

Regular

- Lawyer (admitted five years or more) \$ 125.00
- Lawyer (admitted four years or less) \$ 75.00
- Lawyer (admitted 1 year or less) FREE
- Full Time Law School Employee \$ 30.00
- Public Sector/Nonprofit Employee \$ 75.00

Associate

- Law student (non-voting) FREE

Judicial

- Judge (non-voting)

Complimentary (Annually)

Retired

- Retired (Age 70, Retired from Practice AND Member of either the VSB or any Bar & a Resident of VA) \$ 30.00

- I would like to join the VWAA Listserv
- I would like to join Chapter Listservs for _____
(specify Chapters—can be more than one)

Our membership year is July 1 - June 30

Please return this form along with your payment (if applicable) to:

Virginia Women Attorneys Association
PO Box 3806
Merrifield, VA 22116-3806