Membership Application & Information Sheet - Justice Bobbitt Inn



Professional Information

Name:	Date:
Firm/Court/Organization:	
Street Address:	
City, State, Zip:	
Phone: () Fax:	: ()
Exact Position:	How long in this position:
Describe current job responsibilities & type of practice:	
	mber of years in each:
	es held:
Educational Information	
J.D. Obtained at:	Year:
BA/BS:	Master's Degree (if applicable):
Other (explain):	
Personal Information (optional)	
Home Address:	
Home Phone: ()	Date of birth:
Interests/hobbies:	
General Information	
Where did you hear about the American Inns of Court?	
Why do you want to join this American Inn of Court?	
What special skills or experiences can you offer the org	ganization?
Position sought: Pupil Associate	☐ Barrister ☐ Master of Bench
Send The Bencher quarterly newsletter to my:	☐ Home ☐ Office
Email Address:	

Please attach your most recent resume and information from your sponsor (if applicable).