

# Southern California Family Law American Inn of Court

The Southern California Family Law American Inn of Court is about to begin our fifth year of programs. We are a chapter of American Inns of Court, a fast growing national legal organization with programs designed to increase advocacy skills, collegiality, and professionalism among its members. We are comprised of judicial officers and attorneys of varying experience, and look forward to your participation.

The Inn's meetings are scheduled on the first Tuesday of the month, commencing on October 4, 2011, and running through June 5, 2012. The reception starts at 6:00 p.m., followed by dinner and a program at 6:30 p.m. The program ends at 7:30 p.m. The remainder of the evening until 8:30 p.m. is spent interacting with colleagues and judicial officers. All programs will be held at Matteo's in Westwood, located at 2321 Westwood Blvd, Los Angeles, CA 90064, (310) 475-452, [www.matteosla.com](http://www.matteosla.com). Membership dues for the Inn of Court are \$525, which includes the dinners, wine during the cocktail hour and with dinner, and hors d'oeuvres during the reception. Newer attorneys, up to their fifth year of practice, may join at a discounted rate of \$350. Family law judicial officers may join at no charge.

Membership is limited; please submit your application promptly. Don't miss out on this opportunity to educate, to learn, and to socialize with your colleagues.

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## 2011 - 2012 INN OF COURT MEMBERSHIP APPLICATION FORM

Name \_\_\_\_\_ CA State Bar # \_\_\_\_\_

E-Mail Address \_\_\_\_\_ (Individual program notices will only be e-mailed)

Firm \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Facsimile \_\_\_\_\_

City/Zip Code \_\_\_\_\_ Year Admitted \_\_\_\_\_

Practice Description (optional, for distribution to other Inn members): \_\_\_\_\_

### Method of Payment:

\_\_\_ Enclosed is a check in the amount of \$ \_\_\_\_\_, made out to "Southern California Family Law American Inn of Court"

\_\_\_ Charge \$ \_\_\_\_\_ to my: \_\_\_ Visa \_\_\_ Mastercard

Credit card number: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ CVC/CVV: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Please return completed application and payment to:

Email to [dshebby@jssfamilylaw.com](mailto:dshebby@jssfamilylaw.com)  
Or fax to: "Membership" at 310-481-7170

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