



**STATE BAR OF TEXAS**  
**TAX SECTION**  
**MEMBERSHIP APPLICATION FORM**  
*(Bar Year is from June 1, 2015 – May 31, 2016)*  
*(Please Print Legibly)*

**DUES:**

**Attorney Dues: \$35.00**

**New Lawyers (licensed 2  
years or less): Dues waived**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Facsimile: \_\_\_\_\_

Bar Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Method of Payment:**

**Check**       **Visa**       **MasterCard**       **American Express**

Account Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

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

**Please return to:**  
**State Bar of Texas**  
**Attn: Membership Department**  
**P.O. Box 12487, Austin, Texas 78711-2487**  
**Fax: (512) 427-4424**