



**ORANGE COUNTY BAR ASSOCIATION  
LAWYER REFERRAL & INFORMATION SERVICE  
MEMBERSHIP APPLICATION**

1. \_\_\_\_\_  
(Last Name) (First Name) (Middle Initial)
2. \_\_\_\_\_  
(Street Address) (Suite Number) (City/state/zip)
3. \_\_\_\_\_  
(Firm Name, If Any) (Business Telephone Number)
4. \_\_\_\_\_  
(Fax Number) (Email Address)
5. Are you a member of the Orange County Bar Association? \_\_\_\_\_ Yes \_\_\_\_\_ No
6. Date admitted to the Florida Bar \_\_\_\_\_  
Florida Bar # \_\_\_\_\_
7. In what other state(s) are you licensed to practice law? \_\_\_\_\_
8. Admitted to Federal Bar \_\_\_\_\_ Yes \_\_\_\_\_ No
9. Are you aware of any unresolved ethics complaints filed against you? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If so, attach explanation  
\_\_\_\_\_  
Investigating Agency:  
\_\_\_\_\_  
Date of Complaint \_\_\_\_\_ Status of Complaint \_\_\_\_\_
10. Have you been the subject of an ethical grievance filed with any disciplinary authority or been personally sanctioned by any court in this or any other jurisdiction in which you are admitted?  
\_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, please specify the state, the name of the grievant, the nature of the grievances and the disposition.  
Attach explanation.  
\_\_\_\_\_
11. Engaged in private practice since \_\_\_\_\_
12. Foreign languages in which you are fluent \_\_\_\_\_