

SOUTHWEST LOUISIANA BANKRUPTCY BAR ASSOCIATION

MEMBERSHIP APPLICATION
January 1, 2008 - December 31, 2008
DUES: \$50.00 (Enclose with application)

✉ Please mail application to ✉

SLBBA
P.O. Box 91511
Lafayette, LA 70509-1511

Renewal

New Membership

NAME: _____

FIRM/CO/AGCY: _____

ADDRESS: _____

OFFICE PHONE: _____ E-MAIL: _____

FAX: _____

PLEASE INDICATE YOUR PRIMARY CLIENTELE, IF APPLICABLE

CONSUMER DEBTOR ____ BUSINESS DEBTOR ____ LARGE CREDITOR ____ SMALL CREDITOR ____

OTHER (EXPLAIN): _____

FOR SLBBA OFFICE USE ONLY

DATE RECEIVED: _____

AMOUNT OF DUES PAID WITH APPLICATION: _____ FOR CALENDAR YEAR: _____