

Membership
Colorado Defense Lawyer Association
5761 South Elm St
Greenwood Village, Co 80121

Your Name as you want it listed (please type or print legibly)

Firm Name

Street Address you want material sent to

City, State Zip

Email_____

Phone _____

Area(s) of practice (circle)

Auto	ERISA	Product Liability
Class Action	Premise Liability	Professional Malpractice
Contract Dispute	Empl & Labor Law	Environmental Law
Construction Defense		General Commercial Litigation
Insurance/ Bad Faith		Creation/Organization/Admin
Personal Injury Defense		

I was first admitted to the Bar of the State of Colorado on _____. I acknowledge that more than fifty percent (50%) of my legal practice relates to the defense of civil litigation and hereby make application for membership in the Colorado Defense Lawyers Association.

Signature_____

Please make check payable to Colorado Defense Lawyers Association (CDLA) or you can pay by credit card and fax to 303 284-7994

MC____ Visa____ Name on Card_____

Card Number_____CSV _____

Signature_____

Individual Membership \$195.00

Voluntary contribution to the Timothy Schimberg
Diversity Scholarship Fund _____

Amount Paid \$_____