



STATE BAR OF TEXAS FAMILY LAW SECTION

Membership Application

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Facsimile: _____

Bar Number: _____ E-Mail: _____

Dues: \$40.00

Method of Payment:

Cash Check Credit Card

Credit Card Number _____

Expiration Date _____

Please return to:

Christi A. Lankford

c/o State Bar of Texas, Family Law Section

8620 North New Braunfels, Suite 101

San Antonio, Texas 78217

E-mail: christil@idworld.net