

TO: WESTMORELAND BAR ASSOCIATION  
Membership Committee  
100 North Maple Avenue  
Greensburg, PA 15601-2506  
724-834-6730 • Fax 724-834-6855



www.westbar.org • westbar.org@westbar.org

DATE: \_\_\_\_\_

I hereby apply for membership in the Westmoreland Bar Association as a \_\_\_\_\_ participating \_\_\_\_\_ associate member.  
If elected to membership, I subscribe to and agree to abide by the Constitution and By-laws of the Association.

Name (please print) \_\_\_\_\_

Residence address \_\_\_\_\_

Office address \_\_\_\_\_

Residence telephone \_\_\_\_\_ Business telephone \_\_\_\_\_

Fax \_\_\_\_\_ Email \_\_\_\_\_

Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_

Spouse's name \_\_\_\_\_

Names and ages of children \_\_\_\_\_

Schools attended and dates:

	Name	Date	Major Study
High School	_____	_____	_____
College	_____	_____	_____
Law School	_____	_____	_____

Courts to which admitted and dates \_\_\_\_\_

Supreme Court of Pennsylvania \_\_\_\_\_

Disciplinary Board Number \_\_\_\_\_

1. Do you primarily engage in the practice of law? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes: (a) What percentage of your working time do you devote to the practice of law? \_\_\_\_\_  
(b) In what County do you maintain your principal office? \_\_\_\_\_  
(c) Do you spend more than 50% of your working time in your principal office? Yes \_\_\_\_\_ No \_\_\_\_\_  
(d) When did you open your law office? \_\_\_\_\_

2. **Submit a sample of your letterhead.** If not submitted, give the name, address and telephone number of any law firm on whose letterhead your name appears. \_\_\_\_\_

3. Does your name appear on the office door or marquee of any law firm or law office? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, give name and address of firm \_\_\_\_\_  
 \_\_\_\_\_
4. Are you employed by any company or person on a salary or wage basis rather than on a fee basis? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes: (a) Give name and address of employer \_\_\_\_\_  
 \_\_\_\_\_  
 (b) What percentage of your working time do you devote to legal services for your employer's business? \_\_\_\_\_  
 (c) Main business of employer \_\_\_\_\_
5. Have you ever been subject to any public discipline of the Disciplinary Board of the Supreme Court of Pennsylvania or of any other disciplinary action or disbarment proceedings by any Court or Bar Association? Yes \_\_\_\_\_ No \_\_\_\_\_  
**If yes, attach a full explanation.**
6. Are you a full/participating member of another Bar Association? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, which one \_\_\_\_\_  
 Is your primary office located in that county? Yes \_\_\_\_\_ No \_\_\_\_\_
7. Did you have a law office at another location prior to the one listed here? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, where, when and have you relocated to practice primarily in this county? \_\_\_\_\_  
 \_\_\_\_\_
8. Have you ever applied for membership in this association? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes: (a) Give date of application \_\_\_\_\_  
 (b) Class of membership for which application was made \_\_\_\_\_  
 (c) Explain reason for this application \_\_\_\_\_

Signature \_\_\_\_\_

**REFERENCE (must be a participating member of the Westmoreland Bar Association): I, the undersigned, hereby certify that I am a participating member in good standing; and that I personally know the above applicant is of good moral character and duly qualified for membership in the Westmoreland Bar Association.**

**I recommend the above applicant for admission.**

\_\_\_\_\_  
 Signature, Participating Member, Westmoreland Bar Association

\_\_\_\_\_  
 Name (please print or type name)

**FOR COMMITTEE USE ONLY:**

Application reviewed \_\_\_\_\_. Applicant is (not) recommended for (Participating) (Associate) membership in the Westmoreland Bar Association.

By \_\_\_\_\_  
 Chairperson—Membership Committee

**BOARD OF DIRECTORS:**

Accepted: \_\_\_\_\_ Rejected: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR OFFICE USE ONLY:**

PAID \_\_\_\_\_  DATABASE \_\_\_\_\_  
 SCANNED \_\_\_\_\_  PUBLISHED \_\_\_\_\_