

FLORIDA ADOPTION COUNCIL
APPLICATION FOR MEMBERSHIP
(06/01/2008 thru 05/31/2009)

Member's Name : _____

Name of Firm or Agency (If Applicable): _____

Address: _____

Phone Number: _____

Fax Number: _____

E-Mail (for listserv): _____

Florida Bar Number or License Number _____

States Where Licensed: _____

Total Years As Licensed Adoption Professional: _____

Have you ever been convicted of a crime, or do you now have any criminal charges pending against you other than a minor traffic violation? _____ YES _____ NO

Have you ever been professionally disciplined, or do you now have pending any matter regarding renewal, revocation, or suspension of your license? _____ YES _____ NO

Have you ever been sued by a client, or do you now have pending against you any claims by a client?
_____ YES _____ NO

Check Appropriate Box

Individual Attorney's Office: \$250 - Attorney (includes one email address on listserv)
 \$150 - Additional non-attorney member
(includes separate email address, if desired)

Law Firm: \$250 - First attorney or non-attorney member
(includes one email address on listserv)
 \$150 - Additional attorney or non-attorney member
(includes separate email address, if desired)

Adoption Agency: \$250 - First attorney or non-attorney member
(includes one email address on listserv)
 \$150 - Additional attorney or non-attorney member
(includes separate email address, if desired)

**Licensed Professionals Not
Affiliated With Law Office
Or Adoption Agency
(i.e., LCSW/LMHC/Etc.)** \$150 - (includes one email address on listserv)

Make Check Payable To: FLORIDA ADOPTION COUNCIL

Mail This Statement And Checks To: Robison R Harrell, Treasurer,
Florida Adoption Council
3 Clifford Drive
Shalimar, FL 32579

Amount Enclosed:

Membership Dues* \$ _____
Lobbying Contribution (Optional) \$ _____
Total Amount Enclosed \$ _____

*Florida Adoption Council memberships dues are not deductible in accordance with IRC Sec 6033.

I hereby swear and affirm that the statements in this application for membership are true and correct. I understand and agree that submitting an application for membership does not necessarily mean that the Board of Directors will approve my application and extend an invitation for membership. I further understand and agree that my being permitted to become, and remain, a member of the Florida Adoption Council is within the sole absolute discretion of the organization's Board of Directors, and that its decision is final.

Date

Applicant's Signature

Printed Name

Title