

# Denton County Bar Association

## 2024-2025 Membership Application

### Required Information (for directory, membership, and website use)

Name: \_\_\_\_\_ Texas Bar Number: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Facsimile: \_\_\_\_\_  
Firm/Company: \_\_\_\_\_  
Business Address (including City & Zip Code): \_\_\_\_\_  
Email/Web Address: \_\_\_\_\_  Keep my email private.  
Texas Board Certifications (TBLS): \_\_\_\_\_  
Law School/Graduation Date: \_\_\_\_\_  
List All Other Degrees: \_\_\_\_\_  
Younger than 37 years OR practiced in Texas less than 5 years?  **Would you like to volunteer to mediate for DCAP?**

#### Primary Areas of Practice\* (select two):

\* Having two areas of practice listed in the web directory is included in the fee for bar membership. If you would like three to five areas of practice listed, there is an additional \$75.00 posting fee. Choose from the following:

- |  |   |  |  |  |
|--|---|--|--|--|
| <input type="checkbox"/> Administrative & Public | <input type="checkbox"/> Construction             | <input type="checkbox"/> Family                    | <input type="checkbox"/> Juvenile                    | <input type="checkbox"/> Public Utility        |
| <input type="checkbox"/> ADR                     | <input type="checkbox"/> Consumer                 | <input type="checkbox"/> Finance                   | <input type="checkbox"/> Labor-Employment            | <input type="checkbox"/> Real Estate           |
| <input type="checkbox"/> Antitrust               | <input type="checkbox"/> Creditor-Debtor          | <input type="checkbox"/> Government/Administrative | <input type="checkbox"/> Law Office Management       | <input type="checkbox"/> School Law            |
| <input type="checkbox"/> Appellate               | <input type="checkbox"/> Criminal                 | <input type="checkbox"/> Health Care               | <input type="checkbox"/> LGBT Law                    | <input type="checkbox"/> Securities Law        |
| <input type="checkbox"/> Aviation                | <input type="checkbox"/> Elder Law                | <input type="checkbox"/> Immigration               | <input type="checkbox"/> Litigation: Commercial      | <input type="checkbox"/> Social Security Law   |
| <input type="checkbox"/> Bankruptcy              | <input type="checkbox"/> Entertainment            | <input type="checkbox"/> Insurance                 | <input type="checkbox"/> Litigation: Personal Injury | <input type="checkbox"/> Taxation              |
| <input type="checkbox"/> Business                | <input type="checkbox"/> Environmental            | <input type="checkbox"/> Intellectual Property     | <input type="checkbox"/> Military                    | <input type="checkbox"/> Technology            |
| <input type="checkbox"/> Child Welfare Law       | <input type="checkbox"/> Ethics-Legal Malpractice | <input type="checkbox"/> International             | <input type="checkbox"/> Oil & Gas                   | <input type="checkbox"/> Wills-Trusts-Probate  |
| <input type="checkbox"/> Collaborative Law       |   |  | <input type="checkbox"/> Other                       | <input type="checkbox"/> Workers' Compensation |

### Optional Information

Home Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
Spouse's Name: \_\_\_\_\_ Number of Attorneys in Firm: \_\_\_\_\_  
Date Licensed in Texas: \_\_\_\_\_  
Other State Bar Admissions/Dates/License Numbers: \_\_\_\_\_  
Do you speak a foreign language? \_\_\_\_\_ If yes, what language: \_\_\_\_\_

If you would like to post your photograph on the DCBA website, email your photo to Rosa Castelar at [executivedirector@dentonbar.com](mailto:executivedirector@dentonbar.com). The website will be updated periodically throughout the membership year.

### Application Certification

I, the undersigned, do hereby make application to the Denton County Bar Association for membership and, in making such application, I certify that I am validly licensed to practice law or am a law student of an accredited law school, that I promise to uphold and support the By-Laws of the Association and the Texas Disciplinary Rules of Professional Conduct in all respects and to the best of my personal and professional ability, that all information provided by me in this application is true and correct.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### Application Submission

Please mail this application along with a check made payable to **Denton County Bar Association** in the amount of **\$275.00** or **\$175.00** (licensed in Texas less than two years) to DCBA at 1504 E. McKinney Street, Denton, TX. 76209. Section dues can be included with your DCBA payment. Section dues are Family Law **\$40**, REPTL **\$20**. Denton County Women Lawyers Association **\$25**.  
The DCBA membership year runs from May to April and dues are not pro-rated.

If you have any questions about the DCBA, please call the Denton County Bar Association at 940-320-1500.  
Visit our website at <https://dentonbar.com/membership/>