



www.innsocourt.org/inns/lopardoinn

**MEMBERSHIP APPLICATION
2025-2065 TERM**

1. Full Name/SBN _____
Firm Name _____
Firm (Street/City) Address _____
Business Phone # (____) _____
E-mail Address _____

2. UNDERGRADUATE AND LAW SCHOOL INFORMATION

<u>Name of School</u>	<u>Degree Awarded</u>	<u>Year Graduated</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. DESCRIPTION OF TYPE OF PRACTICE AND COURT EXPERIENCE.
WHAT PERCENT OF YOUR PRACTICE IS TRIAL WORK?
4. PROFESSIONAL AND COMMUNITY ACTIVITIES INCLUDING
PARTICIPATION IN ANY SAN DIEGO INNS OF COURT, IF APPLICABLE.
5. ACADEMIC ACHIEVEMENTS.
6. STATEMENT OF REASONS FOR APPLYING TO THE PROGRAM.

(All responses should be typewritten or legible; you may use a separate sheet)

7. ARE YOU A MEMBER OF THE NORTH COUNTY BAR ASSOCIATION (<http://www.northcountybar.org/>)? MEMBERSHIP IS REQUIRED.

8. MEMBERSHIP APPLICATION IS FOR (Check one):

- ASSOCIATE – 5 YEARS OR LESS PRACTICE
- BARRISTER – MORE THAN 5 YEARS PRACTICE
- MASTER – MORE THAN 15 YEARS IN PRACTICE OR A JUDGE

PLEASE ATTACH YOUR RESUME, IF AVAILABLE.

9. **MASTERS AND BARRISTERS PLEASE COMPLETE:**

LIST THREE AND NO MORE THAN FIVE OF YOUR MOST SIGNIFICANT CASES ON WHICH YOU HAVE WORKED (NOT NECESSARILY TRIALS. GIVE A BRIEF DESCRIPTION ON EACH CASE AND WHY IT IS SIGNIFICANT TO YOU. ALSO LIST THE COURT FILE NUMBER, OPPOSING COUNSEL AND CO-COUNSEL, AND JUDGE, IF ANY.

10. **ALL APPLICANTS - PLEASE COMPLETE:**

LIST THREE PROFESSIONAL REFERENCES.

DATE: _____

Signature: _____

For immediate consideration, return via U.S. Mail, e-mail or fax to:

Alan M. Mansfield. (AIC Membership Chair)

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San Diego, CA 92127

T: (619) 308-5034

E-mail: alan@clgca.com