



Membership Application

Consumer Attorneys of California • 770 L Street, Suite 1200 • Sacramento, CA 95814
Ph: (916) 442-6902 • Fx: (916) 442-7734 • www.caoc.org

CONTACT INFORMATION:

NAME _____

FIRM NAME _____

BUSINESS ADDRESS _____

CITY _____ ST _____ ZIP _____

PHONE _____ FAX _____

EMAIL _____ WEBSITE _____

SPONSOR (RECRUITER) _____

HOME ADDRESS: HOME ADDRESS IS USED ONLY TO IDENTIFY ELECTED REPRESENTATIVES. ADDRESS WILL NOT BE SHARED OR USED FOR ANY OTHER PURPOSE.

I have relationships with the following elected officials:

1. _____
2. _____

CAOC has permission to communicate with me by fax and email.

STATE BAR NUMBER: _____ DATE: _____

AREAS OF PRACTICE:

1. _____
2. _____
3. _____
4. _____

I'D LIKE TO LEARN MORE ABOUT:

- Women's Caucus
- New Lawyer's Division
- Diversity Committee

PAYMENT INFORMATION:

Check enclosed, made payable to CAOC.

| | |
|--------------------|--------------|
| CHECK NUMBER _____ | AMOUNT _____ |
|--------------------|--------------|

Charge my: AMEX VISA MC

| | |
|-------------------|----------------------|
| CARD NUMBER _____ | EXP DATE / CVC _____ |
|-------------------|----------------------|

BILLING ADDRESS / SAME AS ABOVE

NAME ON CARD _____

SIGNATURE _____

TAX INFORMATION: Contributions or gifts to Consumer Attorneys of California are not tax deductible as charitable contributions. However, a portion of your dues payment may be tax deductible as ordinary and necessary business expenses. You may wish to consult with your tax advisor for further information regarding your individual situation.

MEMBERSHIP RATES

REGULAR MEMBER Attorneys primarily engaged in the representation of consumers who have been injured in person or property or whose constitutional or other legal rights are jeopardized.

| FEE | YEARS ADMITTED TO CALIFORNIA BAR |
|---------------------------------|----------------------------------|
| <input type="checkbox"/> \$ 36 | 0 to 1 year |
| <input type="checkbox"/> \$ 60 | 1 to 2 years |
| <input type="checkbox"/> \$ 120 | 2 to 4 years |
| <input type="checkbox"/> \$ 240 | 4 to 5 years |
| <input type="checkbox"/> \$ 355 | 5 to 6 years |
| <input type="checkbox"/> \$ 475 | 6 to 45 years |
| <input type="checkbox"/> \$ 90 | over 45 years |

SUSTAINING MEMBER Includes all regular benefits plus free admittance to the CAOC Annual Convention.
 \$1200 Sustaining Member

SIGNATURE By joining CAOC as a Regular/Sustaining member, I am certifying that less than 40% of my workload involves the defense of insurance companies, manufacturers, governmental entities, transportation companies or public utilities in personal injury or wrongful death matters or workers' compensation litigation. I must notify the CAOC State Office if I no longer meet this criteria.

SIGNATURE _____ DATE _____

ASSOCIATE MEMBER* For attorneys engaged in the prosecution of criminal cases or in the defense of personal injury or workers' compensation litigation. May not hold office or vote.

| | |
|---------------------------------|--------------|
| <input type="checkbox"/> \$ 60 | 0 to 1 year |
| <input type="checkbox"/> \$ 90 | 1 to 2 years |
| <input type="checkbox"/> \$ 150 | 2 to 4 years |
| <input type="checkbox"/> \$ 270 | 4 to 5 years |
| <input type="checkbox"/> \$ 504 | 5 to 6 years |
| <input type="checkbox"/> \$ 624 | over 6 years |

OUT OF STATE ATTORNEY MEMBER*

\$ 156

LAW STUDENT*

\$ 30 School _____

LAW OFFICE SUPPORT*

Any person dedicated to the promotion of the administration of justice and employed by an attorney member of Consumer Attorneys Of California.

\$ 90 Sponsor _____

**May not hold office or vote.*

RETURN WITH PAYMENT TO:

MAIL CAOC, 770 L Street, Suite 1200, Sacramento, CA 95814 EMAIL member@caoc.org FAX (916) 442-7734