

Amistad Long Island Black Bar Association Membership Application



Law Office of J. Stewart Moore
320 Carleton Avenue
Central Islip, NY 11722
631-234-3111
amistadblackbar@gmail.com
www.amistadblackbar.org

Name (First): _____ Middle: _____ Last: _____

Home Address: _____

Office Address: _____

Office Number: _____ Mobile/Home Number: _____

E-mail Address: _____ Other: _____

Law School Attended: _____

Anticipated/Actual Graduation Date: _____

Date of Admission to New York State Bar: _____

Are you in good standing before the New York State Bar? _____

List other jurisdictions you are licensed to practice in below:

Other Bar Associations Memberships: _____

Area(s) of Specialty: _____

Area(s) Experienced To Teach CLE's: _____

Where, if applicable, I was referred to Amistad by: _____

Please check one of the following Membership categories:

- Attorneys & Judges: \$100 Juris Doctorate: \$ 50 Students: \$10

Signature: _____ Date: _____

Please make checks payable to Amistad Long Island Black Bar Association and mail check and application to:

**Law Offices of J. Stewart Moore
Attn: Amistad LI Black Bar Association
320 Carleton Avenue, Suite 3300
Central Islip, NY 11722**