

THE JUSTINIAN FORUM
Membership Application and Directory Update

First Name _____ Maiden Name _____ Last Name _____
M.I. _____

Firm/Company _____ Title/Position _____
Employer _____

Business Address _____

City _____ State _____ Zip _____

Office Phone (_____) _____ Office Fax (_____) _____

Internet E-Mail Address: _____

Home Address _____

Home Phone (_____) _____

Mail all Notices (choose one): ___ via E-Mail (*preferred*) ___ to Business or ___ to Home

Four Primary Areas of Practice (Please be brief):

1. _____

2. _____

3. _____

4. _____

If not actively practicing, describe your position (e.g., consulting, investment advisor, corporate counsel):

Licensed in (States) _____

Law School: _____ Year _____

Italian _____ Father _____ Mother _____ Italian _____ Defamation Issues _____ Other Current Issues _____
Ancestry _____ Spouse _____ Interests _____ Language _____ Culture/Heritage _____ Social _____

I would like to assist or be involved with: Social Programs _____ Cultural Programs _____ CLE _____ Directory _____ Membership Activities _____
Newsletters _____

Signed _____ Date _____

Return Application and \$50.00 payable to THE JUSTINIAN FORUM, c/o Dean Valore, Wegman, Hessler Valore, 6055 Rockside Woods Blvd. Suite 200, Cleveland, OH 44131 or justinianforum@yahoo.com
(For Office Use Only) Date Pd _____ Status: _____ Member _____ Associate Member _____ Student Member _____