

Membership Application

NAME:	
RENEWING MEMBER? information to update any chang	(If renewing member, only complete contact
FIRM:	
ADDRESS:	
TELEPHONE:	
EMAIL:	
for membership dues for the year	ayable to the Western New York Trial Lawyers Association r 2017. I affirm that I am an attorney licensed to practice in and that I devote a substantial portion of my legal practice to Year admitted to practice:;
membership dues for the year 20	hyable to the Western New York Trial Lawyers Association for 017. I affirm that I am a law student/candidate for admission to te a substantial portion of my legal practice to the handling of ation:
Signature: Mail this form with your check t	o: Gross Shuman P.C. 465 Main Street, Suite 600 Buffalo, New York 14203 Attn: Linda M. Grandinetti



Membership Application

NAME:	
RENEWING MEMBER?information to update any changes	(If renewing member, only complete contact
FIRM:	
ADDRESS:	
TELEPHONE:	
EMAIL:	
membership dues for the remainder	ble to the Western New York Trial Lawyers Association for r of the year 2017. I affirm that I am an attorney licensed and that I devote a substantial portion of my legal matters. Year admitted to practice:
membership dues for the remainder for admission to the bar with an inte	ble to the Western New York Trial Lawyers Association for of the year 2017. I affirm that I am a law student/candidate ention to devote a substantial portion of my legal practice to ear of graduation:
Signature:	
Mail this form with your check to:	Gross Shuman P.C. 465 Main Street, Suite 600 Buffalo, New York 14203

www.wnytla.com

Attn: Linda M. Grandinetti