

STATE BAR OF TEXAS

Membership Department



MEMBERSHIP FORM

REINSTATEMENT

Name: _____

Bar Number: _____

Reinstating to:

- Active Status
- Inactive Status
- Active Status w/ an MCLE Non-Practicing Exemption

Did Not Practice Statement

I, _____, certify under the penalty of perjury that I have not practiced law in Texas from _____ through _____.
MM/DD/YYYY MM/DD/YYYY

Signature: _____

Date: _____