



**STATE BAR OF TEXAS**  
**JAMES C. WATSON INN SECTION**  
**MEMBERSHIP APPLICATION FORM**

*(Bar Year is from June 1, 2019 – May 31, 2020)*  
*(Applications submitted after March 1, 2019, entitle you to membership through May 31, 2020.)*  
*(Please Print Legibly)*

**DUES AMOUNT: \$15.00**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Facsimile: \_\_\_\_\_

Bar Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Method of Payment:**

**Check**       **Visa**       **MasterCard**       **American Express**

Account Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name on Card (please print): \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

**Please return to:**  
**State Bar of Texas**  
**Attn: Membership Department**  
**P.O. Box 12487, Austin, Texas 78711-2487**  
**Fax: (512) 427-4424**