



Membership Application

NAME: \_\_\_\_\_

RENEWING MEMBER? \_\_\_\_\_ (If renewing member, only complete contact information to update any changes)

FIRM: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_

EMAIL: \_\_\_\_\_

WNYTLA Membership Referral Name: \_\_\_\_\_

I affirm that I am an attorney licensed to practice in  
Year admitted to practice: \_\_\_\_\_

\_\_\_\_\_ Enclosed is my check for \$50.00 (**0-5 years** admitted to the Bar) payable to the Western New York Trial Lawyers Association for membership dues for 2020. *\*If sending in after May 2020, please enclose a check for \$25.00 for the remainder of the year 2020.*

\_\_\_\_\_ Enclosed is my check for \$75.00 (**6-10 years** admitted to the Bar and attorneys employed in **Government and Public Interest**) payable to the Western New York Trial Lawyers Association for membership dues for 2020. *\*If sending in after May 2020, please enclose a check for \$37.50 for the remainder of the year 2020.*

\_\_\_\_\_ Enclosed is my check for \$125.00 (**over 10 years** admitted to the Bar) payable to the Western New York Trial Lawyers Association for membership dues for 2020. *If sending in after May 2020, please enclose a check for \$75 for the remainder of the year 2020.*

\_\_\_\_\_ I hereby certify that I devote a substantial portion of my legal practice to the handling of litigated matters.

Signature

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Mail this form with your check to:

Lawlor F. Quinlan, Esq.

1000 Liberty Building

Buffalo, New York 14202

(716) 852-5533