

St. Louis Volunteer Lawyers and Accountants for the Arts
LAWYER REGISTRATION

Name _____ Date _____

Firm _____

Address _____ City _____ Zip _____

Work Phone _____ Home Phone _____

Email _____ FAX _____

Areas of Interest

- | | | |
|-----------------|------------------|-------------------|
| Bankruptcy | Immigration | Tax |
| Contracts | Insurance | Tax-exempt status |
| Copyright | Labor/Employment | Trademarks |
| Corporate | Litigation/ADR | Trusts/Estates |
| Entertainment | Nonprofit | Other _____ |
| First Amendment | Real Estate | |

I am licensed in Missouri Illinois Other _____

I am covered by malpractice insurance Yes No

I would be interested in

- | | |
|-------------------------------|---------------------------------------|
| Speaking at a VLAA seminar | Mentoring a student or new volunteer |
| Writing for VLAA publications | Participating as a volunteer mediator |

Please send my supervisor, _____, copies of thank you letters acknowledging my volunteer service.

Here are the names of colleagues who may also be interested in becoming VLAA volunteers:

Name _____ Phone _____

Name _____ Phone _____

Fee-Generating Clients: This roster is made available to clients who are ineligible for *pro bono* services. If you are listed, you will be contacted directly by the client, not by VLAA.

Please add my name to the roster. I have enclosed a check for \$25.

I am willing to consider reducing my fees in appropriate circumstances.

Please return this form to: VLAA, 6128 Delmar, St. Louis, MO 63112; FAX 314/863-6932