

**APPLICATION FOR STUDENT MEMBERSHIP**

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

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

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Law School Currently Attending: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Undergraduate School: \_\_\_\_\_

Date of graduation: \_\_\_\_/\_\_\_\_/\_\_\_\_

Degree Received: \_\_\_\_\_

Areas of legal interest: *Circle those that apply*

- Intellectual Property Litigation      Real Estate Law      Labor & Employment Litigation  
Medical Malpractice      Product Liability      Professional Liability      Trademark Litigation  
Corporate & Business Litigation      Insurance Litigation      Wills & Trusts      Environmental Law  
Construction Law      Family Law      International Law

Other: \_\_\_\_\_

**Why do you want to join the MDLA? Please give a brief description of why you would like to be a member of the MDLA.**

MDLA Member Sponsor (if any): \_\_\_\_\_

If accepted to membership, do you agree to abide by the By-Laws of the Association?(yes or no) \_\_\_\_\_

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

*Student membership to the MDLA is free while attending law school.*

**PLEASE RETURN SIGNED APPLICATION TO:**

MASSACHUSETTS DEFENSE LAWYERS ASSOCIATION  
276 WASHINGTON STREET, SUITE 308 ~ BOSTON, MASSACHUSETTS 02108  
TOLL FREE: 866-915-9851

WWW.MASSDLA.ORG  
*admin@massdla.org*