

Arkansas Association of Criminal Defense Lawyers

PO Box 307 Little Rock, AR 72203 | Phone: 501-626-8992 | Fax: 501-246-8869

MEMBERSHIP APPLICATION

ELIGIBILITY: A member in good standing of the State of Arkansas (except students) who is engaged in the defense of criminal cases is eligible for membership upon approval of application and receipt of annual membership dues. Those regularly employed in a prosecutorial office are not eligible.

MEMBERSHIP CONTACT INFORMATION (Please type or print)

□Mr. □Ms. □Mrs_						
	Last Name	First Name		Middle Initial	Suffix	
Bar Card Number	Bar Card Date	Birthdate		Firm Name	Title	
Street Address		City	State	Zip	County	

Telephone	Fax	Email Address	Website Address		
OTHER MEMBERSHIPS		MEMBERSHIP TYPE			
Are you a member of the NACDL?	🗆 Yes 🗆 No	□ Sustaining Member:	\$250.00		
Member of another Criminal Association?	□ Yes □ No	Regular Member:	\$100.00		
		Public Defender Member	: \$75.00		
Please list other memberships (if any):		Law Student Member:	\$25.00		
		□ Investigator Member:	\$50.00		
		In Mitigation Specialist Memory	nber: \$50.00		

PAYMENT INFORMATION										
Mail application and payment to:	Payment Type	Check		SALENCAN						
AACDL—Membership			WSA MasterCare		EXIQUEES					
PO Box 307						-				
Little Rock AR 72203	Name on Card									
Phone: 501-412-8992	Credit Card Number		Expiration Date		CCV2					
or fax to:										
501-246-8869	Billing Address (if different from abov	/e)	City	State	Zip	-				
with credit card payment										
** Make checks payable to AACDL	Authorized Signature			Date of Application						
FOR AACDL USE ONLY										
CHECK # CC AUTH#	ENTERED BY:		DATE ENTERED:							