



WILLS/ESTATES
LAW
APPLICATION

Elite Lawyers of America, LLC
1409 Hausman Road
Allentown, PA 18104
(610) 432-2221
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APPLICATION FOR MEMBERSHIP

Please complete this application for membership by answering all applicable questions. Please type your responses or use a pen and print clearly. After completing and signing the application for membership, enclose your one-time non-refundable membership check made payable to "Elite Lawyers of America" in the amount of \$500.00. You should receive a response within 2 weeks.

PERSONAL INFORMATION

FIRST: _____ M.I. _____
LAST: _____
FULL NAME: _____
FIRM NAME: _____
ADDRESS: _____
ADDRESS (ctd): _____
CITY: _____
STATE: _____ ZIP: _____
COUNTRY: _____
PHONE (W): _____
PHONE (C): _____
PHONE (FAX): _____
E-MAIL: _____
D.O.B.: _____

EDUCATION INFORMATION

COLLEGE: _____ YR GRAD _____
LAW SCHOOL: _____ YR GRAD _____



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CASE INFORMATION

I hereby certify and represent that I am an attorney authorized to practice law and am a member in good standing in my jurisdiction, county, state and country.

INITIALS

I hereby certify and represent that at least one-third of my legal practice is devoted to the practice of Wills and Estate matters.

INITIALS

Please indicate the number of times you served as lead counsel in the preparation of a Will or Trust on behalf of a client.

NUMBER OF CASES

By completing this application, I hereby agree that I am a lawyer in good standing authorized to practice law in my jurisdiction, state and country and that the information I have provided is true and correct to the best of my knowledge, information and belief and that I, as lead counsel, have concluded the number of Wills or Trusts set forth above. I shall notify the Elite Lawyers of America Organization if I am no longer a member in good standing in my state.

DATE

SIGNATURE