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## MEMBERSHIP APPLICATION

1. The Undersigned hereby applies for membership in the Idaho Association of Defense Counsel:

Name: \_\_\_\_\_ Idaho State Bar No.: \_\_\_\_\_

Year of Birth: \_\_\_\_\_ (yyyy) Year of admission to the Bar: \_\_\_\_\_

2. If a member or an associate of a law firm:

Firm Name: \_\_\_\_\_ Years at firm: \_\_\_\_

3. Firm Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

4. Are you a member of D.R.I? Yes / No

5. Have you ever before applied for membership in IADC? Yes / No

6. Have you ever before been a member of this Association? Yes / No

7. My primary practice areas are (circle all that apply):

- |                          |  |
|--------------------------|--|
| a. Automobile            | g. Insurance                                   |
| b. Commercial Litigation | h. Medical                                     |
| c. Construction          | i. Product Liability                           |
| d. Employment            | j. Professional Liability (other than medical) |
| e. Government Liability  | k. Worker's Compensation                       |
| f. In-House Counsel      | l. Other _____                                 |

8. Please provide a representative list of the names of any insurance companies, self-insured clients, businesses, organizations, or entities that you represent as defense counsel:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. How did you learn about IADC and/or who referred you? \_\_\_\_\_

10. Memberships Dues:

\_\_\_\_ Attorney - **\$250**  
\_\_\_\_ Retired Member - **\$50**  
\_\_\_\_ Law Student - **\$25** List name of law school: \_\_\_\_\_

11. **ACKNOWLEDGMENT:** By signing below, I represent and acknowledge that a substantial portion of my practice is devoted to the representation of defendants or business in civil litigation. To the extent that I engage in personal injury litigation, I DO NOT, for the most part represent plaintiffs. I have read the foregoing, agree to same, and hereby submit this confidential application for membership with the Idaho Association of Defense Counsel.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_