

DEFENSE LAW FIRM AFFILIATE PARTNER

APPLICATION FORM

PART A | GENERAL INFORMATION

1	Name of Law Firm		Date of Applicatio	Date of Application	
2	Main Corporat	e Address			
	Mailing Address		Street Address (if differen	Street Address (if different from mailing)	
	City, State, Zip+4		City, State, Zip+4		
3	Main Phone Number and Fax Number		Website Address	Website Address	
	Please include all di	F igits necessary for dialing from the United S	tates		
4			Designated Representative to the MPL Association ¹		
	Name		Name	Name	
	Title		Title	Title	
	Address (if differen	t from corporate)	Address (if different from	Address (if different from corporate)	
	Phone	Email	Phone	Email	
	Name	rator/Office Manager			
	Title				
	Address (if different from corporate)				
	Phone	Email			
 ¹ The designated representative to the MPL Association is the individual who will receive a copy of all member basis, including administrative mailings (i.e. dues renewal notices, member surveys, etc.) and other important listed here will not receive mailings from the MPL Association unless requested or approved by the designation in the mailing of the individual Defense Attorneys that You Wish to Add to Our Mailing Lis 			er surveys, etc.) and other important men juested or approved by the designated rep	nber program notices or alerts. All other contacts presentative.	
	Name		Name		
	Title		 Title		
	Address (if different from corporate)		Address (if different from corporate)		
	Phone	Email	Phone	Email	
	MPL Association Newsbriefs (emailed, weekly)		MPL Associatoin N	MPL Associatoin Newsbriefs (emailed, weekly)	
	Research Notes (emailed)		Research Notes (emailed)		
	Advocacy Updates (emailed)		Advocacy Updates	Advocacy Updates (emailed)	

The firm is licensed to practice in the following Countries/States/Provinces				
Business Relationships with MPL Association Member Organizations (NOTE: a continuous business relationship with MPL Association Regular or Industry Associate Member is required of all Defense Law Firm applicants) Name of MPL Association Member Length of Service (# of years)				
\$1,800.00 per law firm. New members may pro-rate th	ary 1 through December 31. Annual membership dues are leir dues based on the number of full months left in the lear dues with this application or you may request an invoice.			
Please Check Your Preference				
Our check is included with this application	Please send us an invoice			
Signature of Individual Completing Application	Date			
Name (Print)	Title			
Phone	Email			