



## APPLICATION FOR MEMBERSHIP

I wish to join the Institute for Law and Technology:

- |   | <b>Annual Dues</b> |
|---|--------------------|
| <input type="checkbox"/> <b>Sustaining Membership</b> .....                     | \$5,000            |
| <input type="checkbox"/> <b>Supporting Membership</b> .....                     | \$2,500            |
| <input type="checkbox"/> <b>Sponsoring Membership</b> .....                     | \$1,000            |
| <input type="checkbox"/> <b>Associate Membership*</b> .....                     | \$650              |
| <input type="checkbox"/> <b>Government / Academic / Non-profit Member</b> ..... | \$395              |
- \*Associate memberships are available only to individuals.
- |  |         |
|--|---------|
| <input type="checkbox"/> <b>Individual Sponsoring Membership</b> .....                         | \$1,000 |
| <input type="checkbox"/> <b>Individual Associate Membership</b> .....                          | \$650   |
| <input type="checkbox"/> <b>Individual Academic / Government / Non-Profit Membership</b> ..... | \$395   |
- A check in the amount of \$ \_\_\_\_\_ is enclosed. (Please pay in U.S. dollars. Checks should be made payable to *The Center for American and International Law.*)

Please charge my membership to:     AE     MC     Visa     Discover

Card number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on card: \_\_\_\_\_

Billing address (if different from address below): \_\_\_\_\_

Signature (if paying by credit card): \_\_\_\_\_

Please bill me for \$ \_\_\_\_\_

Name of law firm, corporation or individual \_\_\_\_\_

Person who will serve on Advisory Board:

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

Title (if any): \_\_\_\_\_

Firm or Organization: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Supporting members may designate three Advisory Board representatives and Sustaining Members may designate six Advisory Board representatives. Please use the second page for additional designations.

*Mail, fax, or send as e-mail attachment the completed application to:*

**Brandon White**  
Institute for Law and Technology  
The Center for American and International Law  
5201 Democracy Drive, Plano, TX 75024-3561  
Phone: 972.244.3410  
Fax: 972.244.3401  
[bwhite@cailaw.org](mailto:bwhite@cailaw.org)

## Additional Advisory Board Designees

### *Sustaining and Supporting Members Only*

Name, title and address of person(s) who will serve as the representative on the Advisory Board:

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

Title (if any): \_\_\_\_\_

Firm or Organization: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

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

Title (if any): \_\_\_\_\_

Firm or Organization: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

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

Title (if any): \_\_\_\_\_

Firm or Organization: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

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

Title (if any): \_\_\_\_\_

Firm or Organization: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

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

Title (if any): \_\_\_\_\_

Firm or Organization: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

