



# MEMBERSHIP APPLICATION

Southwestern Institute for  
**INTERNATIONAL AND  
COMPARATIVE LAW**

Name \_\_\_\_\_

Title \_\_\_\_\_

Firm or Business Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

I wish to join the Southwestern Institute for International and Comparative Law (SWIICL) as:

- Sustaining Member .....Annual dues - \$7,500
- Supporting Member .....Annual dues - \$5,000
- Sponsoring Member .....Annual dues - \$2,500
- Associate Member .....Annual dues - \$1,000
- Individual Member ..... Annual dues – \$650
- Academy Alumni Member .....Annual dues -- \$150

How do you want to pay for your membership?

- I am enclosing a check in the amount of \$ \_\_\_\_\_  
(Make your check payable to The Center for American and International Law.)
- I want to pay with my credit card:  AE  Visa  MC  Dis  
Name on card: \_\_\_\_\_  
Card number: \_\_\_\_\_  
Expiration MM/YYYY: \_\_\_\_\_ Security code: \_\_\_\_\_
- I want to wire the funds. Please send me instructions.
- Please bill me for the amount of \$ \_\_\_\_\_

Please mail this form to:

SWIICL, The Center for American and International Law, 5201 Democracy Dr., Plano, TX 75024 USA  
or fax to: 972-244-3410 c/o Brandon White or email to: [bwhite@cailaw.org](mailto:bwhite@cailaw.org)

## SWIICL MEMBER BENEFITS

**Sustaining Member – \$7,500 annual dues**

- send 2 people to the Academy tuition-free
- name 6 people to the Advisory Board; appoint 6 Deputy members (see form below)
- send an unlimited number of persons tuition-free to the annual Symposium

**Supporting Member – \$5,000 annual dues**

- send 1 people to the Academy tuition-free and a second for \$2,000
- name 4 people to the Adv. Brd.; appoint 4 Deputy members (see form below)
- send 8 people + Advisory Board members tuition-free to the Symposium

**Sponsoring Member – \$2,500 annual dues**

- send 1 person to Academy for an additional \$1,300
- name 2 people to the Adv. Brd.; appoint 2 Deputy members (see form below)
- send 4 people + Adv. Brd. members tuition-free to Symposium

**Associate Member – \$1,000 annual dues**

- send 1 person to Academy for an additional \$2,500
- name 1 person to the Adv. Brd.; appoint 1 Deputy member (see form below)
- send 2 people + the Adv. Brd. member tuition-free to the Symposium

**Individual Member – \$650 annual dues**

- attend the Academy yourself or send someone by paying an additional \$2,850
- become a member of the Adv. Brd. and attend the Symposium tuition-free
- send 1 additional person to the Symposium tuition-free

**Academy Alumni Member -- \$150 annual dues**

- Become a member of the Adv. Brd. and attend the Symposium tuition-free
- Receive a discount at other Institute programs

Enter here the name(s) of your proposed Advisory Board representatives:

Advisory Board representative

Name: \_\_\_\_\_  
Position or title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Firm: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Work phone: \_\_\_\_\_  
Cell phone: \_\_\_\_\_

Advisory Board representative

Name: \_\_\_\_\_  
Position or title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Firm: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Work phone: \_\_\_\_\_  
Cell phone: \_\_\_\_\_

Advisory Board representative

Name: \_\_\_\_\_  
Position or title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Firm: \_\_\_\_\_  
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Advisory Board representative

Name: \_\_\_\_\_  
Position or title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Advisory Board representative

Name: \_\_\_\_\_  
Position or title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Firm: \_\_\_\_\_  
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Advisory Board representative

Name: \_\_\_\_\_  
Position or title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Firm: \_\_\_\_\_  
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Work phone: \_\_\_\_\_  
Cell phone: \_\_\_\_\_

Enter here the name(s) of your proposed Advisory Board deputy representatives:  
(Sponsoring, Supporting, and Sustaining members only)

Advisory Board deputy representative

Name: \_\_\_\_\_  
Position or title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Firm: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Work phone: \_\_\_\_\_  
Cell phone: \_\_\_\_\_

Advisory Board deputy representative

Name: \_\_\_\_\_  
Position or title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Advisory Board deputy representative

Name: \_\_\_\_\_  
Position or title: \_\_\_\_\_  
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Advisory Board deputy representative

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Position or title: \_\_\_\_\_  
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Cell phone: \_\_\_\_\_

Advisory Board deputy representative

Name: \_\_\_\_\_  
Position or title: \_\_\_\_\_  
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