



## 2016 MEMBERSHIP APPLICATION - LAW FIRM

- New Member**
- Existing Member Renewal – No changes to Delegate or Firm information**
- Existing Member Renewal – With changes to Delegate or Firm information**

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

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

\_\_\_\_\_

Telephone: \_\_\_\_\_ Facsimile: \_\_\_\_\_

Number of Attorneys: Firm-Wide \_\_\_\_\_ In Chicagoland Offices: \_\_\_\_\_

Name of Firm's Women's Initiative (if exists): \_\_\_\_\_

Chicago Office Managing Partner: \_\_\_\_\_

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

Head of Diversity (Chicago or National?): \_\_\_\_\_

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

**DUES INFORMATION:** The Coalition Annual Membership Dues are based on the number of attorneys in the firm's Chicagoland office(s), according to the following scale:

1 – 25 Attorneys:	\$ 625/year	100 – 300 Attorneys:	\$3,125/year
26 – 50 Attorneys:	\$ 935/year	+300 Attorneys:	\$4,375/year
51 – 99 Attorneys:	\$1,875/year		

Checks should be made payable to The Coalition of Women's Initiatives in Law.

*Note: This Membership is for Chicagoland offices only. The New York Coalition has separate dues for New York offices.*

**PAYMENT ENCLOSED IN THE AMOUNT OF \$ \_\_\_\_\_.**

Please return this application and payment to:

The Coalition of Women's Initiatives in Law  
332 S. Michigan Avenue  
Suite 1032-C284  
Chicago, IL 60604-4434

***Please complete Delegate, Alternate Delegate, and Mailing List information on following page.***



**MAIN DELEGATE, ALTERNATE DELEGATES, and MAILING LIST**

Each Coalition Member Firm shall identify one partner or associate or employee, preferably with direct responsibility for the firm's women's initiatives, to serve as the firm's Main Delegate to the Coalition and one associate to serve as the firm's Associate Delegate to the Coalition. The Main Delegate is the Firm's primary representative within the Coalition, attends the Coalition's Annual Meeting on behalf of the Firm, encourages her colleagues' participation in Coalition events, and is eligible to serve as an Officer or on the Board of Directors of the Coalition. The Main Delegate is typically an experienced attorney and/or leader on diversity initiatives in the firm.

Each firm shall also identify at least one, and as many as two, additional experienced attorneys or employees who the firm wishes to be actively involved in the Coalition as Alternate Delegates. These delegates can serve on committees and attend the Annual Meeting, although only the Main Delegate can serve on the Board. If no Alternate Delegates are identified, the Associate Delegate will be designated as an alternate. All delegates will be added to the Coalition mailing list for events and updates unless you indicate otherwise.

Coalition events are open to all attorney employees of Law Firm Members, not just delegates.

**Main Delegate**

Title/Position: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Committee(s) currently on: \_\_\_\_\_

Committee(s) I wish to join: \_\_\_\_\_

**Alternate/Additional Delegate #1**

Title/Position: \_\_\_\_\_

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

Committee(s) currently on: \_\_\_\_\_

Committee(s) I wish to join: \_\_\_\_\_

**Alternate/Additional Delegate #2**

Title/Position: \_\_\_\_\_

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

Committee(s) currently on: \_\_\_\_\_

Committee(s) I wish to join: \_\_\_\_\_

**Associate Delegate**

Title/Position: \_\_\_\_\_

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

Committee(s) currently on: \_\_\_\_\_

Committee(s) I wish to join: \_\_\_\_\_

**Mailing List:** *Please identify here the email addresses of any other attorneys within your Firm that you would like to be included on the Coalition's mailing list:* \_\_\_\_\_

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