OHIO ASSOCIATION OF MAGISTRATES MEMBERSHIP FORM

(If you are already a member… please give this to a non-member friend)

MEMBER ANNUAL DUES ……. $125.00
Members are entitled to all the rights and privileges granted by the Association, including the receipt of the Quarterly Newsletter.

YES. I WANT TO BE A MEMBER OF THE OHIO ASSOCIATION OF MAGISTRATES! ENCLOSED IS MY CHECK FOR MEMBERSHIP, MADE PAYABLE TO THE OHIO ASSOCIATION OF MAGISTRATES.

MAGISTRATE _____

COURT _____

MAILING ADDRESS _____

_____

TELEPHONE ( )_____ FAX ( )_____

E–MAIL _____

FULL–TIME OR PART–TIME MAGISTRATE _____

DATE OF ADMISSION TO BAR _____

DATE APPOINTED MAGISTRATE _____

Check area(s) of practice:

o Common Pleas o Juvenile
o Court of Appeals o Domestic
o Probate o Municipal

Check your choice of committee(s):

o Practice and Procedure o Education
o Ethics o Nominating
o Program

o I authorize the above information to be included on the OAM website
o I do not wish to be on the OAM website
o Please list only the following identifying information about me on the OAM website

_____

_____

How did you hear about the Association?

_____

_____

Return with your check to:

Ohio Association of Magistrates
c/o Thomas F. Shutt
2079 West Fifth Avenue
Columbus, Ohio 43212