



AMERICAN ASSOCIATION FOR JUSTICE
**BIRTH TRAUMA
LITIGATION GROUP**
MEMBERSHIP APPLICATION

(Membership limited to AAJ Regular, Sustaining, President's Club & Life members. If you are not a member of the American Association for Justice (AAJ), please also complete Section C at the end of this application.)

Annual Membership Dues: \$200

Name: _____

Name of Firm: _____

Address: _____

Office Phone Number: _____

Fax Number: _____

E-mail Address: _____

AAJ ID#: _____

This must be included in your application. If you do not know your number, call AAJ at 202.965.3500 or 800.424.2725, ext. 861 1.

Year Admitted to Practice: _____ State Bar #: _____

Practice Area: _____

Licensed to practice in the following jurisdictions: _____

Type of Membership:

Regular Sustaining President's Club Life Leaders Forum

I certify that I do not represent insurance companies and/or hospitals in birth trauma cases and that I will abide by the bylaws of the Birth Trauma Litigation Group.

Signature: _____

Date: _____

Please make check payable to Birth Trauma Litigation Group. Please send completed application and check to:

Rita T. Planera
Legal Administrator
CORBOY & DEMETRIO, P.C.
33 North Dearborn Street, 21st Floor
Chicago, Illinois 60602
312-346-3191
Rplanera@corboydemetrio.com

If we need to contact you to service your membership record or to provide you with information about member products and services and advocacy and legislative updates, we will honor your contact preferences. By providing your contact information, including phone number, fax number, and email address, you consent and give permission for AAJ to contact you by any of those means, which may include calls to your mobile phone, faxes, or emails. You may contact AAJ at any time to change your preferences.