

**LOUISIANA ASSOCIATION OF DEFENSE COUNSEL  
APPLICATION FOR MEMBERSHIP**

1. NAME: Mr./Miss/Mrs. \_\_\_\_\_
2. FIRM NAME: \_\_\_\_\_  
Office Address: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_ Office Telephone# \_\_\_\_\_  
Fax No: \_\_\_\_\_
3. Home Address: \_\_\_\_\_  
Home Telephone # \_\_\_\_\_ Spouse's Name: \_\_\_\_\_
4. If member or associate of firm, state number of years of association: \_\_\_\_\_
5. Date of birth: \_\_\_\_\_ Year of Admission to Bar: \_\_\_\_\_ Bar Roll No. \_\_\_\_\_
6. Names of colleges and universities attended and the dates of degrees awarded: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Courts in which you are admitted to practice: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Names of bar associations and professional organizations of which are a member: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Were you formerly a member of the LADC? \_\_\_\_\_
10. How many years preceding this application have you continuously devoted a substantial portion of your professional time to the representation of the defense in civil litigation? \_\_\_\_\_ What percentage of your practice is devoted to defense work? \_\_\_\_\_
11. Representative clients for whom you or your firm does defense work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
12. Sponsoring member: \_\_\_\_\_  
Name

Date of application: \_\_\_\_\_  
Signature of Applicant \_\_\_\_\_

Applicant: Membership Dues are \$175.00 per year. We are currently offering a one year free membership if you have never been a member of the LADC. Please have the sponsoring member complete the second page of this application and forward the application, to:

William R. Corbett, Executive Director  
8982 Darby Avenue  
Baton Rouge, LA 70806  
Telephone: 225-928-7599

**QUESTIONNAIRE TO BE COMPLETED BY SPONSORING MEMBER**

(This information will be treated as personal and confidential)

1. Sponsoring member's name and address: \_\_\_\_\_

\_\_\_\_\_

2. Law firm or company: \_\_\_\_\_

3. How long have you known applicant? \_\_\_\_\_

4. Is applicant, in your opinion, of high professional standing? \_\_\_\_\_

5. Does applicant devote a substantial portion of his professional time to the representation of the defense in civil litigation?

\_\_\_\_\_

6. Are you completely satisfied that applicant possesses all of the necessary qualifications for membership in this Association? \_\_\_\_\_

7. From the information available to you, are you satisfied that the applicant does not devote a substantial portion of his professional time to the representation of the interests of plaintiffs in personal injury matters? \_\_\_\_\_

8. Do you unqualifiedly recommend the acceptance of this application? \_\_\_\_\_

9. Additional comments, if any: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Sponsor's Signature