BLACK LAWYERS OF VENTURA COUNTY

NEW MEMBER PROFILE

Please complete this form and return to BlackLawyersVC@gmail.com

Personal Data

Name	Profession
Phone number	Email
Address	
Best way to contact you	Firm/Agency
Areas of practice	
State(s) admitted to practice	Years of practice
Organizations and social clubs	r to contact youFirm/Agency
Charities	
Graduate degree(s) Law school/graduate school(s)	
Undergraduate degree(s)	Undergraduate school(s)
Community and Leadership Go	enumber
What objectives do you hope to accomplish as	
Why did you decide to join BLVC?	number
What are your goals for the Ventura County le	Email act youFirm/Agency
Are you interested in a leadership position with	n BLVC? □ Yes □ No
Areas of interest (Please check all that apply):	
☐ Mentorship	☐ Professional Development
☐ Scholarship Committee	☐ Ad Hoc Pro Bono
☐ Continuing Legal Education (CLE)	☐ Annual Dinner
☐ Community Action	☐ Social Media/Internet
☐ Member Recruitment	☐ Other:

ASSOCIATION