

GEORGIA ASSOCIATION OF CRIMINAL DEFENSE LAWYERS

MEMBERSHIP RENEWAL | FY2024

Membership Year December 1, 2023 – November 30, 2024

Contact Details | Practice Information

Full Name _____ Email _____

Office Address _____ County _____
(Address to receive GACDL mail and listed in GACDL's public-facing Lawyer Search Directory. Include city, state, and zip code)

Residential Address _____ County _____
(For internal GACDL use only, please provide the address where you vote to assist in GACDL's legislative efforts. Include city, state, and zip code.)

Business Telephone _____ Mobile Telephone _____

Georgia Bar Number _____ Date Admitted _____

Other State Bar(s) & Date(s) Admitted _____

Please check all that apply:

- I have been a GACDL member in the past and am rejoining
- I have been or am actively engaged in the defense of criminal cases
- I am not a full-time judge or employed by a prosecutorial office
- I am a full-time criminal defense investigator (associate member)
- I am a law school student.

In addition to Criminal Defense, my practice includes:

- Personal Injury
- Immigration
- Landlord/Tenant
- Appeals/Post-Conviction
- Other _____
- Family Law
- Crimmigration
- ADR/Mediation
- Parole

School attending and date of expected graduation _____

Please list any Federal and State courts to which you are admitted _____

I am not a full-time member of the judiciary or employed as a full-time prosecutor. I agree to resign my GACDL membership and immediately notify GACDL upon becoming employed, appointed, or elected one of these positions.

(Typing Name Here Acts as Signature)

Diversity | Equity | Inclusion | Belonging

What is your gender? Female (cisgender & transgender women) Male (cisgender & transgender men)
 I prefer to self-describe my gender as: _____ I'd prefer not to answer

What is your age? Under 24 25-29 30-39 40-49
 50-59 60-69 70 or older I'd prefer not to answer

(Optional) Date of birth: _____

What is your Race? American Indian or Alaska Native Asian Black or African American
(one or more categories may be selected) Native Hawaiian or Pacific Islander White I'd prefer not to answer
 I prefer to self-describe my Race as: _____

What is your Ethnicity? Hispanic, Latino/a/x, or of Spanish origin Not of Hispanic Latino/a/x, or Spanish origin
(one or more categories may be selected) Mexican, Mexican American, Chicano/a/x Puerto Rican Cuban
 Another Hispanic, Latino/a/x or Spanish origin I'd prefer not to answer
 I prefer to self-describe my Ethnicity as: _____

ANNUAL DUES (FY2024):

[\$40 of each dues amount listed *optionally* supports GACDL's Legislative work]

- Regular membership: \$220
- Associate (full-time criminal defense investigators) memberships: \$220
- New Attorney membership: \$135 (first 2 years after bar admission)
- Public Defender/Nonprofit: \$125 (full-time circuit, county, city, or federal employees)
- Contributing membership: \$255
- Sustaining membership: \$690 (one complementary seminar registration)
- Substantial membership: \$5,200 (option to pay over 5 years)
- Student membership: \$40

Please contact GACDL with any questions.
215 Church St., Ste.111, Decatur, GA 30030 | (404) 248-1777