

WASHINGTON COUNTY BAR ASSOCIATION
MEMBERSHIP APPLICATION

Date: _____

Name: _____

Bar No.: _____

Firm Name: _____

Firm Address: _____

Office No.: _____

Fax No.: _____

E-mail Address: _____

Major Practice Areas: _____

Dues: \$50.00 annually due in January or upon initial application.

Submit to WCBA Secretary-Treasurer:
Michael A. Shiflet
Brewer, Worten, Robinett
P.O. Box 1066
117 W. Fifth Street, Suite 500
Bartlesville, Oklahoma 74005
Telephone: (918) 336-4132
Facsimile: (918) 336-9009
E-mail: mshiflet@bwrlawoffice.com