



The Voice of the
Defense Bar™

Corporate Membership Amendment Form

Use this form **ONLY** to amend the corporation's membership by adding or substituting corporate additional members.

Each additional corporate employee may join for \$150. **Substitutions may be made at no cost one time annually.**

Each corporate member will receive subscriptions to For The Defense and In-House Defense Quarterly magazines.

Corporation or Company Name _____

Address _____

City _____ State/Province _____ Zip/Post Code _____ Country _____

Telephone _____ Fax _____ Email _____

SUBSTITUTIONS

— Corporate Additional Name _____ Email _____

☐ Male ☐ Female Title/position (required) _____

Substituting for _____
Corporate Additional Member to be deleted

If an attorney, first time admitted to the Bar in _____ in _____
state/province month/day/year bar number

☐ In-house counsel (as defined below*)

☐ Claims executive (as defined below**)

OPTIONAL

DRI is committed to the principle of diversity in its membership and leadership. Accordingly, applicants are invited to indicate which one of the following may best describe them:

☐ African American

☐ Asian American

☐ Hispanic

☐ Native American

☐ Caucasian

☐ Other _____

Date of birth _____
month/day/year

— Corporate Additional Name _____ Email _____

☐ Male ☐ Female Title/position (required) _____

Substituting for _____
Corporate Additional Member to be deleted

If an attorney, first time admitted to the Bar in _____ in _____
state/province month/day/year bar number

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☐ Hispanic

☐ Native American

☐ Caucasian

☐ Other _____

Date of birth _____
month/day/year

* In-house counsel is defined as a licensed attorney who is employed exclusively by a corporate or other private sector organization, for the purpose of providing legal representation and counsel only to that corporation, its affiliates and subsidiaries.

** Any member of DRI employed as a claims professional by a corporation or insurance company, who spends a substantial portion of his or her professional time hiring or supervising outside counsel in the representation of business, insurance companies or their insureds, associations or governmental entities in civil litigation, or those claims executives who directly or indirectly manage other professionals who do so, will be entitled to free attendance at any DRI program.

DRI Corporate Membership Amendment Form, *continued*

ADDITIONS

— Corporate Additional Name _____ Email _____

☐ Male ☐ Female Title/position (required) _____

If an attorney, first time admitted to the Bar in _____ in _____
state/province month/day/year bar number

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☐ Claims executive (as defined below**)

OPTIONAL

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☐ Asian American

☐ Hispanic

☐ Native American

☐ Caucasian

☐ Other _____

Date of birth _____
month/day/year

— Corporate Additional Name _____ Email _____

☐ Male ☐ Female Title/position (required) _____

If an attorney, first time admitted to the Bar in _____ in _____
state/province month/day/year bar number

☐ In-house counsel (as defined below*)

☐ Claims executive (as defined below**)

OPTIONAL

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☐ Asian American

☐ Hispanic

☐ Native American

☐ Caucasian

☐ Other _____

Date of birth _____
month/day/year

Referred by _____
Name of referring DRI Member attorney (if applicable)

I hereby request the forgoing amendments be made to this corporate membership.

Signature _____ Date _____
Corporate billing contact

All applications must be signed and dated.

DUES

Number of additional corporate employees _____ × \$150 = \$ _____

Total \$ _____

PAYMENT METHOD

☐ My check for \$_____ (USD) is enclosed.

☐ Please bill me. (Your additions will be inactive until DRI receives payment.)

☐ Please charge my ☐  VISA ☐  MasterCard ☐  American Express.

Card # Exp. Date /

Signature as it appears on card _____

Please remit payment to:

DRI

72225 Eagle Way | Chicago, IL 60678-7252

P: 312.795.1101 | F: 312.795.0747

E: membership@dri.org | dri.org

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