MASSACHUSETTS BAR ASSOCIATION

LAWYER REFERRAL SERVICE 2014–15 New Member Application

Please fill out the form below, list your practice areas on page ii of this application, review the Rules of the Lawyer Referral Service on page iii and sign and date the application. Return this form, your payment and Certificate of Insurance to:

Massachusetts Bar Association Lawyer Referral Service 20 West St., Boston, MA 02111-1204

Questions? Call the MBA Lawyer Referral Service at (617) 338-0556 or email LRS@MassBar.org. Please print or type.

Name:	
Firm:	
Firm address:	
City/state/zip:	
County:	Email:
Office phone:	Cell:
Mailing address (if different)	
City/state/zip:	
MBA member #:	Date admitted to Mass. bar:
If you are admitted to practice in any other state, and (see page 29 of the LRS Handbook):	I want to receive referrals, please list the state and date admitted
1 2	
State 🔺 Date 🔺 Stat	te 🔺 Date 🔺 State 🔺 Date 🔺
Please indicate your communication preferen	ces:
How should the LRS contact you? (choose one):	nail 🗆 Phone 🗀 U.S. Mail

Do you want to receive broadcast emails from the LRS? \Box Yes \Box No

ATTORNEY CASE ASSIGNMENT CRITERIA

Refer to the "Defining Your LRS Listing" section on page 18 of this handbook and select up to 36 areas of practice codes for your LRS record. You may also place up to four codes in each of the following: jurisdiction, language and other states where you are licensed to practice.

PRACILCE CODES (See pages 18–29 of the LRS Hanabook)						
1	7	13	19	25	31	
2	8	14	20	26	32	
3	9	15	21	27	33	
4	10	16	22	28	34	
5	11	17	23	29	35	
б	12	18	24	30	36	

LANGUAGE CODES (See page 30 of the LRS Handbook)

COURT/AGENCY CODES (See page 30 of the LRS Handbook)

REFERRAL PREFERENCES

Check if you wish to receive:

- Reduced-fee referrals in addition to your regular fee referrals
- □ Small Claim Referrals (see page 17)
- Limited Assistance Representation referrals in family law matters only
- □ Calls transferred directly to your office at the time of referral. Tel.:
- □ Information on volunteer opportunities: □ Dial-A-Lawyer □ Community Service programs

All referrals will be emailed to you directly at the time the referral is made. Indicate how you would like to receive your Monthly Case Updates (choose one):

Email
U.S. Mail

DUES PAYMENT, CHECK ONE BOX.

- □ I wish to join the LRS. I have been admitted to the bar for five years or less and I am enclosing my nonrefundable dues payment of \$100.
- □ I wish to join the LRS. I have been admitted to the bar for five years or more and I am enclosing my nonrefundable dues payment of \$150.

Make check payable to: Massachusetts Bar Association/LRS.

Credit card payment:

□ MC	
🗆 VISA	
🗆 AMEX	

Exp:

2014–15 NEW MEMBER APPLICATION

ACCEPTANCE OF LRS RULES

- 1. LRS Rules: I hereby acknowledge review of the LRS Statement of Standards and Rules. I agree to comply with the rules and affirm that the foregoing statements and information on file with the LRS are true and complete.
- 2. **Competence:** I hereby certify that in accordance with Section X of the LRS Statement of Standards and Rules, I am competent and either experienced or trained in the practice codes selected for referrals. I also acknowledge that I am aware of the MBA's Mentor Program for conferences with more experienced lawyers as needed.
- 3. **Insurance:** I acknowledge that I am required to carry and therefore do carry, minimum professional liability coverage of \$250,000/\$500,000. A Certificate of Insurance naming the MBA LRS as the certificate holder (see request form on page 44) must be submitted prior to the certificate's expiration date. I agree to notify the LRS immediately if this poicy is terminated or coverage is reduced during the period of LRS participation. I further agree to carry the required professional liability coverage if and when I am no longer an LRS panel member, but still have active cases that were referred during my participation with the LRS program.

□ Check here if you do <u>not</u> wish to have information regarding your insurance shared with the MBA Insurance Agency Inc.

- 4. Disciplinary Action: I acknowledge that I am a member in good standing of the bar, that I have never been disciplined publicly or privately by the Board of Bar Overseers or any other disciplinary authority in this or any other jurisdiction, and that I have complied with the registration requirements of the BBO. If there has been any such discipline, check box, briefly explain in a separate letter and include the BBO Summary of Complaint.
- 5. **Fee:** I am aware that the fee charged for the initial, half-hour consultation may not be more than \$25. During the first half-hour, I should inform the user (if possible) of the extent of the lawyer fees likely to be involved in the case (including the hourly rate, retainer fee and number of hours to conclude the case.) Written fee agreements are strongly recommended. (*See Rule 4.19(e) regarding resolution of fee disputes.*)
- 6. **Dues:** I have remitted my annual nonrefundable LRS dues. (The dues are assessed at \$150 if admitted over five years or \$100 if five years or under.) I am aware that renewal dues are assessed at the beginning of each fiscal year (April 1–March 31) and are not prorated.
- 7. **Referral Fee:** I acknowledge an obligation to contribute to the LRS 15 percent of the full collected net fee (i.e., after deduction of unreimbursed expenses and disbursements). There is no fee remittance required when the referral is on a reduced-fee basis ("reduced-fee" is defined in LRS Rule 12.3 as \$75 per hour or less).
- 8. **Reporting:** I acknowledge that I must return and update 30-day and final reports on all referred matters. Referral fees may be returned as the fee is collected but no later than the return of the final notice.
- 9. Indemnification: I hereby waive any and all claims against the Massachusetts Bar Association (hereinafter referred to as "MBA"), the MBA Lawyer Referral Service Committee and all subcommittees, MBA officers, MBA members and MBA employees for any loss or liability arising out of a referral to me and/or my handling of a referral. I also agree to indemnify the MBA from any and all claims, losses and liability, including attorney's fees arising from my negligence in handling any referral made by or through the MBA Lawyer Referral Service.

WAIVERS

Limited Assistance Representation Referrals: My signature on this application confirms I have been certified to accept Limited Assistance Representation (LAR) referrals for Family Law matters.

LRS Application – Veteran Matters: In order to receive referrals for (ADVB) Administrative – Veteran Benefits, you must be accredited as an attorney through the U.S. Department of Veterans Affairs. My signature on this application confirms I have complied with the accreditation processes/procedures and have received my accreditation.

Board of Bar Overseers: I hereby authorize the Board of Bar Overseers to release any and all information to the LRS regarding any disciplinary proceedings that have been commenced against me by the Board of Bar Overseeras within the past five years. This does not include complaints that have not resulted in the commencement of disciplinary proceedings. I understand that applicants who have been disciplined within the past five years and not reviewed by the LRS Committee will not be accepted until after a satisfactory review by the committee. Current panelists who are disciplines, will be suspended until after a favorable review by the LRS Committee.

□ I have read and will comply with the above rules. Subscribed and sworn under the penalties of law.

Read and signed 🔺

Date 🔺

BBO# 🔺

Print name 🔺