

SPEAKERS BUREAU VOLUNTEER SIGN UP:

Please complete this form to volunteer to speak about the State Bar, its mission and programs.

1. Name: _____
2. Address: _____
3. Email: _____
4. Phone: Office: _____ Cell: _____
5. Law Firm or Employer: _____
6. Experience with the State Bar: _____
7. Subjects you are willing to present:

Check all that apply:

- State Bar's Role in the Regulation of the Legal Profession in NC
- State Bar's Disciplinary Process
- State Bar's Ethics Program
- Lawyer's Assistance Program
- Legal Specialization in NC
- Client Security Fund
- IOLTA
- LegalZoom and HB 436
- NC Dental Board Case and Anti-Trust Questions in the Regulation of the Legal Profession
- Other: _____

8. Are you willing to travel to make a presentation? Yes No
 - If yes, how far from the address above: 50 miles 100 miles 200 miles or more
9. Which days of the week are you available for presentations: _____
10. What time of day do you prefer for presentations: Morning Afternoon Night
11. How many presentations would you be willing to make in a 12 month period? _____