

Minnesota American Indian Bar Association (MAIBA) Membership Classification and Application

Regular: Regular members are persons who are (i) enrolled members of any Indian tribe or band, or persons who are recognized by their Indian community of residence or origin as being Indian, and (ii) admitted to and in good standing with any state bar association. Regular members are eligible to vote and to hold office or directorship in MAIBA, and have all other rights, privileges, and duties attendant to membership in MAIBA. **Dues for regular members are \$35 per year.**

Associate: Associate members are persons who are (i) enrolled members of any Indian tribe or band, or persons who are recognized by their Indian community of residence or origin as being Indian, and (ii) who are law students or law school graduates not admitted to the bar, or persons who have regular assignments or duties as advocates, prosecutors or judicial officers in tribal courts. Associate members are not eligible to vote, hold office or serve as directors in MAIBA, except as provided in Article V, Section 2 of the MAIBA Bylaws. Associate members have all other rights, privileges, and duties attendant to membership in MAIBA. **Dues for associate members are \$15 per year.**

Special: Special members are those persons interested in the law directly relating to Indians who are not eligible for regular or associate membership but are members in good standing in any state bar association, are law school graduates not admitted to the bar, or are law students. Special members are not eligible to vote, hold office or serve as directors in MAIBA, but have all other rights, privileges, and duties attendant to membership in MAIBA. **Dues for special members are \$35 per year.**

APPLICATION FORM

Name: _____

Preferred mailing address: _____

Phone: _____ **Fax:** _____

E-mail address: _____

Law School: _____ **Year of Graduation:** _____

Attorney ID # (First-time regular members must attach copy of attorney license.): _____

Bar Admissions: _____

Tribe (First-time regular and associate members must attach proof of enrollment or recognition by Indian community of origin or residence.): _____

Practice areas: _____

Membership category for which you are applying: _____

Signature: _____ **Date:** _____

Please send membership applications to: MAIBA, P.O. Box 3712, Minneapolis, MN 55403. Checks for dues should be made payable to MAIBA.