



# Membership Application

Local Government Attorneys of Virginia / 9 S. 12th Street, 2nd Floor, Richmond, VA 23219  
 804.643.4433 / lgava.org  
 Questions? Contact Amy Sales at **804.643.4433** or **amy.sales@easterassociates.com**

## Dues Amount Owed

### Active Member Dues

(by population of locality)

- under 5,000 **\$250 / year**
- 5,001 - 15,000 **\$325**
- 15,001 - 50,000 **\$425**
- 50,001 - 100,000 **\$650**
- 100,001 - 200,000 **\$940**
- over 200,001 **\$1,110**
- Other Active **\$510**  
(VML/VACo/Ind. Sch. Bds.)

### Associate Member Dues

For Private Law Firms (by total number of attorneys in firm)

- 1 - 5 attorneys **\$350 / year**
- 6 - 10 attorneys **\$425**
- 11 - 20 attorneys **\$510**
- 21 - 40 attorneys **\$650**
- 41 attorneys or above **\$750**

For Other Institutions (e.g., government offices, nonprofits)

- Associate/other **\$510 / year**

### Individual Member Dues

(retired or ineligible for active/associate)

- \$55 / year**

### Judicial Member Dues

- \$0 / year**

Visit [lgava.org](http://lgava.org) for more explanation of membership categories.

LGA's dues year begins **September 1**. For new members joining from **September 1 - February 28**, pay the yearly amount shown above. For new members joining from **March 1 - July 31**, pay 1/2 of the yearly amount shown above. For new members joining **August 1-31**, membership will not begin until **September 1**; dues are the full yearly amount. Please make check payable to **Local Government Attorneys of Virginia** and mail with application to 9 South 12th St., 2nd Floor, Richmond, VA, 23219.

## Application

\_\_\_\_\_ Date

\_\_\_\_\_ Locality or Firm Name

Active  Associate  Individual  Judicial  
 Membership Type (check one)

\_\_\_\_\_ Chief Counsel's Name

\_\_\_\_\_ Email

\_\_\_\_\_ Direct Phone

\_\_\_\_\_ Office Phone

\_\_\_\_\_ Mailing Address

\_\_\_\_\_ Mailing Address

\_\_\_\_\_ City, State, Zip

\_\_\_\_\_ Physical Address

\_\_\_\_\_ Physical Address

\_\_\_\_\_ City, State, Zip

\_\_\_\_\_ Fax

### Other attorneys to be included on mailing list

\_\_\_\_\_ Name

\_\_\_\_\_ Email

\_\_\_\_\_ Direct/Cell Phone

\_\_\_\_\_ Name

\_\_\_\_\_ Email

\_\_\_\_\_ Direct/Cell Phone

\_\_\_\_\_ Name

\_\_\_\_\_ Email

\_\_\_\_\_ Direct/Cell Phone

### Attorneys in locality/firm with different address, if any

\_\_\_\_\_ Name

\_\_\_\_\_ Email

\_\_\_\_\_ Direct/Cell Phone

\_\_\_\_\_ Name

\_\_\_\_\_ Email

\_\_\_\_\_ Direct/Cell Phone

\_\_\_\_\_ Mailing Address

\_\_\_\_\_ City, State, Zip

\_\_\_\_\_ Physical Address

\_\_\_\_\_ City, State, Zip