

REQUEST FOR APPLICATION TO ACTIVE STATUS

Date:
Name: License No
My Current Status is: ☐ Inactive ☐ Honorary ☐ Judicial ☐ Emeritus Pro Bono ☐ Suspended
I am seeking a change to active status: \Box before the end of the current year OR \Box next calendar year
I hereby request that a To Active Status Application Packet , which includes my specific and individual status change requirements, be sent to me at the following email address:
Email:
All licensed legal professionals, regardless of license status, are required to furnish an email address to the WSBA. See Rule 13 of the Washington Supreme Court's Admission and Practice Rules (APR) and the WSBA Bylaws, Article III Section B.1.b
Is your public address on file with the WSBA a physical street address and in the state of Washington? ☐ Yes ☐ No
 Method of Payment: □ Check (in the amount of \$100 payable to Washington State Bar Association) □ Credit Card (please complete the section below) Please Note: Our service provider will charge you a separate non-refundable transaction fee of 2.5% on all bank card transactions. There is no transaction fee if you mail in
a check.
I authorize the WSBA to charge the below noted credit card \$100:
Master Card VisaAMEX Credit card No Expiration date
Authorized Signature
Name as it appears on card
Address (if different from above)
If you have not received your Application Packet within 2 weeks, contact us using the information below.
For Office Use Only
Investigation Fee 42288 LICMR
Date:
Check No Amount: \$

