

MEMBERSHIP APPLICATION

MCDR, Attn: Treasurer, 10319 Westlake Drive, Suite 247, Bethesda, MD 20817

Name: _____

Business Affiliation or Name: _____ Practice Area: _____

Address : _____ City: _____ State: _____ Zip: _____

Day Phone: _____ Evening Phone: _____ Cell: _____

Fax: _____ E-mail: _____ Website: _____

May we include this information in our Membership Directory? Yes _____ No _____

Check One: Member \$75 _____ Patron \$100 _____ President's Club \$150 _____

Make check payable to **Maryland Council for Dispute Resolution**

Or, you can make payment at our website using **Paypal**

MCDR welcomes your participation and inquiries. If you have any questions, please email MCDRadmin@earthlink.net