



SEMINOLE COUNTY BAR ASSOCIATION LEGAL AID SOCIETY

2022 PRO BONO REGISTRATION

Name: _____ Phone: _____

Email: _____ Area of Practice: _____

Please contact me by: ☐ Phone ☐ Email

I will donate in lieu of service contribution:*

☐ \$350.00 ☐ 5 payments of \$70.00 ☐ 10 payments of \$35.00 ☐ One time Donation \$

*To pay online, please visit <http://scbalas.com/make-a-difference/make-a-donation/> or send a check to the address below.

I prefer to take a case(s) in the following areas:

☐ Family ☐ Elder Law ☐ Housing ☐ Other: _____

I would like to participate in a Special Pro Bono project:

☐ Helping seriously ill Children and their Families

☐ Veterans Monthly Legal Advocacy Project at the Casselberry Public Library

☐ Assist in our Housing Monthly Legal Advice Clinic

☐ Sealing and Expungement Workshop at Goodwill Industries

I would like to participate in Advice Only Sessions:

☐ Family ☐ Elder Law ☐ Other: _____

Pro Bono Exemption

☐ Exempt, but I would like to make a donation of: \$ ☐ I provide services/donations to another Legal Aid | I am exempt because:

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL FREE 1-800-435-7352, WITHIN THE STATE OR ONLINE AT WWW.FRESHFROMFLORIDA.COM. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE. OUR REGISTRATION NUMBER IS 1944.

Thank you for your support and consideration

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