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SHAWN R. ATTAKAI  
VICE-PRESIDENT  
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SECRETARY  
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TREASURER

**NAVAJO NATION BAR ASSOCIATION, INC.**  
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## MEMORANDUM

**To:** Navajo Nation Bar Association, Inc. Members

**From:** Alvina Earnhart, NNBA President

**Date:** October 30, 2023

**Re:** 2024 NNBA Annual Membership Dues

Please be informed that **the deadline** for receipt of Navajo Nation Bar Association, Inc. (NNBA) 2024 membership dues is **Friday, February 02, 2024 by 5:00 p.m. MST TIME. If your payment is not received by 5:00 p.m., February 02, 2024, a late penalty of \$30.00 will be assessed.** Payment Methods Available: Online, Check, Money Order & Payments Over the Phone.

**NO CASH ACCEPTED, NO WAIVERS AND NO REFUNDS, PAYMENT IN FULL IS EXPECTED. PLEASE MAKE YOUR PAYMENT TO THE NAVAJO NATION BAR ASSOCIATION, INC.**

Membership dues are assessed as follows: (please check one)

- \$150 Regular Membership Active membership in good standing.  
 \$85 Inactive Membership Non-practicing and non-voting members (Request to transfer to inactive status must be approved by the Admissions Committee before January 1, 2024)  
 \$75 Judicial Membership Active and retired Judges (non-voting members)

### **Contact Information:**

Please fill out the form below: (print clearly)

Full Legal Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

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

Business  Home:  (Please Check One)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Required Email Address: \_\_\_\_\_

District: (Please circle one based on your residence or place of employment)

ART / CH / CR / KY / SR / TC / WR  
(Alamo/Ramah/Tohajiilee)

If you are licensed in another state, please include bar number here for our records:

New Mexico: \_\_\_\_\_ Arizona: \_\_\_\_\_

Utah: \_\_\_\_\_ Other: \_\_\_\_\_

Colorado: \_\_\_\_\_ Other: \_\_\_\_\_

Practice Areas: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

We are placing the 2024 NNBA Directory on the website for the public. Would you like your information to be placed on the Online 2024 NNBA Directory?

\_\_\_ Yes \_\_\_ No

**Payment Method:**

\_\_\_ Check: # \_\_\_\_\_ Payment Over Phone # \_\_\_\_\_

\_\_\_ Online Payment: # \_\_\_\_\_ Money Order # \_\_\_\_\_

\_\_\_ Invoice: # \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*FOR NNBA USE ONLY:*

*INVOICE:* \_\_\_\_\_

*WALKED IN:* \_\_\_\_\_

*CHECK:* \_\_\_\_\_

*PAYMENT OVER PHONE:* \_\_\_\_\_

*MONEY ORDER:* \_\_\_\_\_

*ONLINE:* \_\_\_\_\_

*PAID IN FULL: YES \_\_\_ NO \_\_\_*

\_\_\_ *NNBA MEMBER INFORMATION UPDATE/PAYMENT FORM*

\_\_\_ *2023 NNBA MCLE REPORTING FORM NL* \_\_\_ *E* \_\_\_

\_\_\_ *NNBA REQUEST FOR LISTING \$* \_\_\_\_\_ , # \_\_\_\_\_