STATE BAR OF TEXAS



MEMBERSHIP DEPARTMENT

Request for Enrollment As An Inactive Member

I,	(name), Bar Card Number	, request
enrollment as an inactiv	e member of the State Bar of Texas effective	·
I understand that while	on inactive status, I may not practice law in thi	s state, engage
in any activity requiring	g an active Texas law license, hold office in the	ne State Bar of
Texas, or vote in any el	ection conducted by the State Bar of Texas.	
	Signature:	
	Bar Number:	
	Date:	

Please return the completed form via email at memmail@texasbar.com, fax at (512) 427-4424, or mail to State Bar of Texas, Membership Department, PO Box 12487, Austin, TX 78711-2487.