



MEMBER CONTACT INFORMATION & PREFERENCES FORM

Expanded online member directory listing available. Visit <http://e.michbar.org> for more information and to make changes to your record.

DIRECTORY ADDRESS (will be published in the Member Directory unless a Limited Directory Listing Request Form is submitted and approved by SBM. See statement box below.)

Full Name: _____ Member P#: _____

*Signature: _____ Effective Change Date: _____

* Member's signature is **required** before any changes to contact information and preferences are made. With my signature, I attest that the information being furnished on this form is accurate.

Firm/Company: _____

Address: _____

City, State, Zip: _____ Country: _____

Work phone: _____ Fax: _____

E-mail: _____ Website: _____

Publish my e-mail address in the member directory Do not publish my e-mail address

SECONDARY ADDRESS (may be required): You must complete this area and furnish SBM with your street address **if** your Directory Address above is only a mailing address, i.e., a PO Box. Provided the Directory Address above is a street address, you may also use this area to provide a secondary address for SBM communications (i.e., invoice; *Michigan Bar Journal*). SBM does not publish secondary address information.

Street Address: _____

City, State, Zip: _____ Country: _____

Secondary address confidential Use my secondary address for SBM communications

MICHIGAN BAR JOURNAL

Do not mail any issues of the *Michigan Bar Journal*; I prefer online access.

PRIVACY PREFERENCES (may choose more than one):

- Send me e-mails directly from SBM endorsed & member benefits providers.
- Do not mail information from non-affiliated parties (i.e., candidates for SBM office, specialty associations, legal publishers, CLE, etc.).
- Do not mail information from SBM endorsed & member benefits providers (i.e.: insurance, travel, technology discounts, etc.).

Our Member Privacy and Website Policy may be viewed at www.michbar.org/generalinfo.

If you wish to withhold publication of your contact information from the SBM member directory, you must submit a LIMITED DIRECTORY LISTING REQUEST FORM for SBM review and approval. The policy and form can be found on the website at www.michbar.org/generalinfo/pdfs/Limited_form.pdf.

Return this completed form by fax: (517) 372-1139; OR by e-mail: sbmadressfix@michbar.org; OR by mail: State Bar of Michigan, Attn: Member Records, 306 Townsend Street, Lansing, MI 48933-2012

Questions: (888) SBM-ForU or (888) 726-3678