Attorney Enrollment Form
Legal Care Program
Samaritan Center

I am interested in helping with the Legal Care Program.

Name: _____ Bar No: _____ Date: _____

Address: _____

City, State, Zip: _____

Office phone: _____

Office FAX: _____

Email: _____

Foreign languages spoken _____

I would like to register for malpractice coverage with the State Legal Expense Fund –
[ ] Yes [ ] No

I practice in the follow areas of the law (check as many as appropriate):

- ☐ Adoptions
- ☐ Bankruptcy
- ☐ Child custody
- ☐ Child support
- ☐ Civil litigation
- ☐ Civil rights
- ☐ Consumer rights
- ☐ Contracts
- ☐ Credit access
- ☐ Debt collection
- ☐ Disability claims or rights
- ☐ Domestic relations
- ☐ Elder abuse
- ☐ Guardianships
- ☐ Health issues
- ☐ Housing issues
- ☐ Immigration
- ☐ Juvenile law
- ☐ Medicaid benefits
- ☐ Mental health issues
- ☐ Nursing home issues
- ☐ Powers of attorney
- ☐ Public assistance
- ☐ Public utilities
- ☐ Real estate
- ☐ Spousal abuse
- ☐ Torts/Personal Injury
- ☐ Taxation
- ☐ Unemployment claims
- ☐ Wills, probate & estates
- ☐ Workman's comp
- ☐ Other: _____
- ☐ Other: _____
- ☐ Other: _____

- ☐ I am willing to come to the Samaritan Center once
  ___ biweekly, ___ monthly, ___ quarterly,
  to provide legal advice/mediation to less fortunate persons.
- ☐ What days during the week would be most convenient for you to see clients at the Samaritan Center? _____

- ☐ What hours during the day would be most convenient? _____

- ☐ Would you prefer seeing Samaritan Center referred clients at your office rather than at the Samaritan Center? [ ] yes [ ] no

- ☐ I am willing to advise and represent some less fortunate persons who may be referred by the Samaritan Center Legal Care program. I may decline any matter.

- ☐ I am willing to consult with or mentor other attorneys in the Legal Care program from my special knowledge and experience.

- ☐ I would be interested in teaching needy persons about their legal rights and developing their legal self-help skills.

- ☐ I am trained as a mediator and am willing to provide mediation services.

Samaritan Center Legal Care

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Email: legalcare@midmosamaritan.org
For more information visit: www.midmosamaritan.org/legalcare.