## AMERICAN COLLEGE OF BUSINESS COURT JUDGES Membership Application

Name			
(Please print nar	ne as you would like it to	o appear on your membership certificate.)	
Court			
Mailing Address			
City, State and Zip			
Office Phone and Fax			
Home or Mobile Phone (optional)			
Office Email (preferred: □ yes □	no)		
<b>Personal Email</b> (preferred: □ yes □ no) If your court system has a highly set e-mail filter, you may wish to use your personal e-mail address, as many messages come through a list-serv.			
Name, Contact Info of Exec. Assi	stant (optional)		
Please send information to these ot	her judges:		
Dues: \$100 — Payable to America Check attached		•	
is eligible for membership, only if he i. has engaged as a judg ii has served in a court o iii. has been designated b	e or she — ge principally in the trial of chancery; or ny his/her court administ nably anticipates such o	•	
Having read the grounds for eligibili	ty, I believe that I currer	ntly meet one or more of such qualifications.	
Signature:		Date:	
Please mail to the Treasurer:	Judge Heather A. We Marion County Super		

Marion County Superior Court 6215 N. Tuxedo Street Indianapolis, IN 46220