



**SIMCOE COUNTY LAW ASSOCIATION
INVOICE FOR 2021 ANNUAL DUES**

Dear Member:

Kindly forward payment for your 2021 SCLA membership via cheque, etransfer, or online payment and support your local professional association. Remember, your membership includes your library access card, courthouse access card, weekly newsletter, updates on the profession from LSO, FOLA, and OBA, access to locker rental (separate fee), listing on and access to the SCLA website, use of and access to the Law Libraries in the County as well as access to functions hosted by Simcoe County Law Association, including local presentations of LSO continuing education programs.

Annual membership for each lawyer for the year 2021 is:

2021 Regular Member Annual Dues	\$125.00	2021 Articling Student Annual Dues	\$62.39
13% HST	\$16.25	13% HST	\$8.11
TOTAL	\$141.25	TOTAL	\$70.50

*Law Students, Retired Lawyers, and Honorary Life Membership (50+ years since their call to the bar) are welcome to membership at no charge:

(Name) _____

* Please note that Law Students, Retired Lawyers, and Articling Students will not be granted courthouse access cards or be listed on the SCLA website.

* If your practice is not located in Simcoe County and you are a member of your primary association, email library@scla.ca with proof of membership and the \$27.50 + HST FOLA fee will be reimbursed from the total cost.

Methods of Payment:

Please note that payment by cheque or EFT is encouraged for multiple member payments, while individuals may use any payment method that is most convenient for them.

1. Pay your dues by EFT. Email: accounting@scla.ca Password: dues2021. (Please enclose form below)
2. Pay your dues by online payment at www.scla.ca.
3. Pay your dues by cheque. Please make cheques payable to **SIMCOE COUNTY LAW ASSOCIATION** and **remit with the bottom portion of this invoice to:**

Joshua Valler, Treasurer
Simcoe County Law Association
c/o Barriston Law
151 Ferris Lane Suite 202
Barrie, Ontario L4M 6C1

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H.S.T. Registration Number: **10807 9286 RT0001**

REMITTANCE COPY (“(Please also mail completed form below)”)

Total Members Renewed _____

Total Payment \$ _____

Firm Name _____

Address _____

Lawyer Names (please list):

Cancellation: I wish to cancel my membership.

Please complete and email this form to library@scla.ca

Name _____

Firm Name _____