



2026 LAW FIRM REGISTRATION FORM

We need your help now more than ever to continue serving clients in critical need.
Please consider accepting cases and contributing financially.

Firm: Website:

Contact: Bar Number:

Firm Address: City:

Zip Code: Cell: Office Number:

E-Mail: Languages Spoken:

CASE ACCEPTANCE

YES! WE WILL ACCEPT CASES FROM THE FOLLOWING PROJECTS (PLEASE CIRCLE ALL THAT APPLY).

CONSUMER/FINANCE

*Chapter 7 Bankruptcy,
Foreclosure, Collections,
Garnishment, Evictions*

CHILD ADVOCACY

*Attorney Ad Litem,
Guardian ad Litem, Foster
Youth, Human Trafficking,
Neurodivergent*

HEIRS/WILLS

*Deeds, Titles, Wills,
Estate Planning, Litigation,
Probate Administration*

IF YOU WOULD LIKE TO COMPLETE THIS
FORM ONLINE, PLEASE SCAN HERE



OR VISIT OUR WEBSITE AT
DADELEGALAID.ORG/ATTORNEYS/.

FAMILY LAW

*Divorce, Name Change,
Adoption, Paternity,
Support Modifications*

VENTURE LAW

*Contracts, Patent,
Copyright, Trademark,
501c3, Incorporation*

ELDER LAW

*SSI, Disability, Medicare,
Medicaid, Veterans, Benefits
Appeals*

OTHER AREAS OF EXPERTISE (PLEASE SPECIFY):

“BUY IN” CONTRIBUTIONS

WE WILL MAKE A TAX-DEDUCTIBLE DONATION IN THE AMOUNT OF: ____ \$350.00 PER ATTORNEY.

WE WILL MAKE AN ADDITIONAL FIRM CONTRIBUTION IN THE AMOUNT OF: _____.

Please mail this form and return with your check payable to:
Dade Legal Aid 28 West Flagler Street, Suite 608, Miami, FL 33130

TO PAY BY CREDIT CARD, PLEASE COMPLETE THE FORM BELOW (WE ONLY ACCEPT VISA AND MASTERCARD).

MC/VISA (ONLY): EXP: CVV:

Cardholder Name: Payment Amount:

Billing Address/ Zip Code:

Signature: _____ Date: _____