JOHN CHUNG LAW
PROTECT YOUR CAREER

Name: _____ Date: _____

Classification: _____

Work Location: _____

Non CDCR Email: _____

Mailing Address: _____

Telephone Number: _____

Please Select Membership Type (check one)

[ ] Peace Officer Monthly ($40)

[ ] Peace Officer Annually ($400)

[ ] Non Peace Officer Monthly ($30)

[ ] Non Peace Officer Annually ($300)

Payment Information

Note: Only Annual Memberships May Be Paid by Check or Money Order

Credit Card Type (Visa, MC, Amex, Discover): _____

Credit Card Number: _____

Expiration Date: _____ Security Code: _____

Billing Address (if different from above): _____

By signing below, I agree to abide by the terms & conditions outlined in the John Chung Law Membership Agreement. I also authorize enrollment in John Chung Law according to the Membership type selected and authorize payment with the information provided above. I agree that Membership does not begin until this application is processed.

Date: _____ Print Name: _____

Signature: _____

Please fill out completely and submit this John Chung Law Offline Membership Form by:

Regular Mail: John Chung Law
2030 Main St., Suite 1300
Irvine, CA 92614

Facsimile: 877-989-2327

Email to: Membership@JohnChungLaw.com