

Corporate Membership Amendment

CM-A-2024

Referred by: _____
Name of DRI member attorney (if applicable)

Referring
committee: _____
Name of DRI committee (if applicable)

Use this form **ONLY** to amend the corporation's membership by adding or substituting corporate additional members. Each additional corporate employee may join for \$150. **Substitutions may be made at no cost one time annually.**

Each corporate member will receive subscriptions to For The Defense and In-House Defense Quarterly magazines.

Corporation or Company Name _____		
Address _____	City _____	State/Province _____
_____	Zip/Post Code _____	Country _____
Phone _____	Email _____	

SUBSTITUTIONS

Corporate Additional Name _____		
Title/position (required) _____		Email _____
Substituting for _____ Corporate Additional Member to be deleted		
If an attorney, first time admitted to the Bar in:		
_____	in _____	_____
state/province	month/day/year	bar number
☐ In-house counsel (as defined below*) ☐ Claims executive (as defined below**)		
OPTIONAL	DRI is committed to advancing diversity, equity and inclusion in its membership and leadership. Accordingly, applicants are invited to indicate which of the following may best describe them:	
	MM/YY of birth _____	
	☐ Male ☐ Female ☐ Prefer not to say	
	☐ I am an armed service veteran	
	☐ African American ☐ Hispanic ☐ Caucasian ☐ Multi-Racial ☐ Asian American ☐ LGBTQIA+ ☐ Native American ☐ Other: _____	

Corporate Additional Name _____		
Title/position (required) _____		Email _____
Substituting for _____ Corporate Additional Member to be deleted		
If an attorney, first time admitted to the Bar in:		
_____	in _____	_____
state/province	month/day/year	bar number
☐ In-house counsel (as defined below*) ☐ Claims executive (as defined below**)		
OPTIONAL	DRI is committed to advancing diversity, equity and inclusion in its membership and leadership. Accordingly, applicants are invited to indicate which of the following may best describe them:	
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	☐ African American ☐ Hispanic ☐ Caucasian ☐ Multi-Racial ☐ Asian American ☐ LGBTQIA+ ☐ Native American ☐ Other: _____	

* In-house counsel is defined as a licensed attorney who is employed exclusively by a corporate or other private sector organization, for the purpose of providing legal representation and counsel only to that corporation, its affiliates and subsidiaries.

** Any member of DRI employed as a claims professional by a corporation or insurance company, who spends a substantial portion of his or her professional time hiring or supervising outside counsel in the representation of business, insurance companies or their insureds, associations or governmental entities in civil litigation, or those claims executives who directly or indirectly manage other professionals who do so, will be entitled to free attendance at any DRI program, excluding the Annual Meeting.

DRI Corporate Membership Amendment Form, *continued*

ADDITIONS

Corporate Additional Name _____						
Title/position (<i>required</i>) _____		Email _____				
If an attorney, first time admitted to the Bar in:						
_____ in _____		_____				
state/province		month/day/year	bar number			
☐ In-house counsel (as defined below*)		☐ Claims executive (as defined below**)				
OPTIONAL	<i>DRI is committed to advancing diversity, equity and inclusion in its membership and leadership. Accordingly, applicants are invited to indicate which of the following may best describe them:</i>					
				MM/YY of birth _____		
				☐ African American ☐ Hispanic ☐ Caucasian ☐ Multi-Racial ☐ Asian American ☐ LGBTQIA+ ☐ Native American ☐ Other: _____		
				☐ Male ☐ Female ☐ Prefer not to say ☐ I am an armed service veteran		

Corporate Additional Name _____						
Title/position (<i>required</i>) _____		Email _____				
If an attorney, first time admitted to the Bar in:						
_____ in _____		_____				
state/province		month/day/year	bar number			
☐ In-house counsel (as defined below*)		☐ Claims executive (as defined below**)				
OPTIONAL	<i>DRI is committed to advancing diversity, equity and inclusion in its membership and leadership. Accordingly, applicants are invited to indicate which of the following may best describe them:</i>					
				MM/YY of birth _____		
				☐ African American ☐ Hispanic ☐ Caucasian ☐ Multi-Racial ☐ Asian American ☐ LGBTQIA+ ☐ Native American ☐ Other: _____		
				☐ Male ☐ Female ☐ Prefer not to say ☐ I am an armed service veteran		

I hereby request the foregoing amendments be made to this corporate membership.

I authorize DRI to send me announcements via mail, facsimile and phone about its programs, services and all other offerings that may be of interest to me or my colleagues. I also consent to receipt of notices from DRI in electronic form, including email and commercial electronic messages. I understand I have the right to withdraw my consent at any time.

Signature _____ Date _____ All applications must be signed and dated.
 Corporate billing contact

Dues Corporate Membership (<i>includes up to four corporate employees</i>) \$500 Number of additional corporate employees: _____ x \$150 = \$ _____ (<i>excluding the first four</i>) Total Due \$ _____	Please remit payment to: DRI 72225 Eagle Way Chicago, IL 60678-7252 P: 312.795.1101 F: 312.795.0747 membership@dri.org dri.org
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Payment Method ☐ My check for \$ (USD) is enclosed. ☐ Please bill me. (Your membership will be inactive until DRI receives payment.) ☐ Please charge my credit card. (<i>Provide card information.</i>)	☐ VISA ☐ MasterCard ☐ American Express Card # Exp. Date - Name on Card _____ CVC Authorized Signature _____
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