

**UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF NEW YORK**

**2003 BIENNIAL ATTORNEY REGISTRATION FORM**

**TITLE:** Mr. \_\_\_\_ Mrs. \_\_\_\_ Miss. \_\_\_\_ Ms. \_\_\_\_

**NAME:**

\_\_\_\_\_  
**(Last) (First) (Middle)**

**FIRM NAME:** \_\_\_\_\_

**OFFICE ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**BUSINESS TELEPHONE NUMBER:** (\_\_\_\_) - \_\_\_\_\_

**FACSIMILE NUMBER:** (\_\_\_\_) - \_\_\_\_\_

**E:MAIL ADDRESS IS NOW A REQUIRED FIELD**

**\*ELECTRONIC (E-MAIL) ADDRESS:** \_\_\_\_\_

**NOTE - AN E:MAIL ADDRESS IS REQUIRED AND WILL BE NECESSARY FOR USE WITH THE COURT'S ELECTRONIC CASE FILES SYSTEM (CM/ECF)**

**DATED:** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_

**NOTE:** A supplemental statement of any changes in the foregoing information shall be filed within ten (10) days of such change. [Refer to Local Rules 10.1(b)2, 41.2(b) & 83.1(e)] (Blank attorney registration forms are available on the court's website at [www.nynd.uscourts.gov](http://www.nynd.uscourts.gov))

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FOR OFFICE USE ONLY: 1) ASSIGNED BAR ROLL NUMBER: \_\_\_\_\_  
2) DATE FEE PAID: \_\_\_\_\_ 3)

If you have a question concerning the **Biennial Attorney Registration**, please phone **(315) 234-8686**.