

**KATY BAR ASSOCIATION DUES STATEMENT**  
**SEPTEMBER 2025 – AUGUST 2026 BAR YEAR**

Name: \_\_\_\_\_  
Firm: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Annual Dues for September 2025 – August 2026 \$50.00

**Please make checks payable to *Katy Bar Association* and mail with this form to:**

**Katy Bar Association  
c/o Andrew Weisblatt  
2312 Katy Fort Bend Rd.  
Katy, TX 77493**

You may also join KBA or renew your membership using the portal on our website:  
[www.katybar.org](http://www.katybar.org).

**I am a renewing member and have no changes to the information previously provided. \_\_\_\_**

**NOTE: If you are a new member or a renewing member who has changes to the information provided with your last renewal, please help us keep our records current by returning a completed Member Profile with your payment.**

**THANK YOU FOR YOUR CONTINUED SUPPORT!**

PLEASE DO NOT WRITE BELOW THIS LINE

---

Date Paid

Ck. No. \_\_\_\_\_

Amount \_\_\_\_\_

**KATY BAR ASSOCIATION**  
**2025-2026 MEMBER PROFILE**

Please return this form and your dues payment of \$50.00 to:

**Katy Bar Association**  
**c/o Andrew Weisblatt**  
**2312 Katy Fort Bend Rd.**  
**Katy, Texas 77493**

You may also join KBA and provide your Member Profile information using the portal on our website: [www.katybar.org](http://www.katybar.org).

New Member? \_\_\_\_\_ Renewal? \_\_\_\_\_

Name (required): \_\_\_\_\_

If you are a renewing member, check here if your information is unchanged \_\_\_\_\_

Renewing members: Complete only the sections that must be updated.

New members: Complete all sections:

SBT No: \_\_\_\_\_

Firm: \_\_\_\_\_

E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Preferred Areas of Practice:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

Jurisdictions: \_\_\_\_\_

Board Certification: \_\_\_\_\_

Other Professional Credentials: \_\_\_\_\_

\_\_\_\_\_