

TARRANT COUNTY COURT REPORTERS ASSOCIATION

P.O. Box 471043
Fort Worth, TX 76147-1043

Membership Application/Renewal
Membership Dues \$20.00

NAME _____

FIRM/COURT/SCHOOL _____

BUSINESS ADDRESS _____

HOME ADDRESS _____

OFFICE PHONE _____ HOME PHONE _____

MOBILE PHONE _____ FAX NUMBER _____

E-MAIL _____

(TCCRA sends monthly meeting reminders, newsletter notices, and periodic sensitive, important information via e-mail. For privacy concerns, please provide a personal or business e-mail address, not your official Tarrant County e-mail address.)

TEXAS CSR # _____ YEAR ISSUED _____

OTHER CERTIFICATIONS (Circle all that apply):

RPR RMR CRR RDR CBC CCP CLVS Other _____

CAT SYSTEM(S) _____

FREELANCE INDEPENDENT / FREELANCE FIRM / OFFICIAL / STUDENT /

OTHER _____

SIGNATURE

DATE