



SEMINOLE COUNTY BAR ASSOCIATION LEGAL AID SOCIETY

2018 PRO BONO REGISTRATION

Name: _____ Phone: _____

Email: _____ Languages: _____

Please contact me by: Phone Email

I will donate in lieu of service contribution:

\$350.00 | 5 payments of \$70.00 | 10 payments of \$35.00 | One time Donation \$

I prefer to take a case(s) in the following areas:*

Family | Consumer | Housing | Other:

I would like to participate in a Special Pro Bono project:*

Helping seriously ill Children and their Families

Veterans Monthly Legal Advocacy Project at the Casselberry Public Library

Department of Corrections Justice Teachings

Sealing and Expungement Workshop at Goodwill Industries

I would like to participate in Advice Only Sessions:*

Family | Consumer | Housing | Domestic Violence Victims

Pro Bono Exemption

Exempt, but I would like to make a donation of: \$ | I provide services/donations to another Legal Aid | I am exempt because:

**For more information about specific types of cases, please visit www.scbalas.com*

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL FREE 1-800-435-7352, WITHIN THE STATE OR ONLINE AT WWW.FRESHFROMFLORIDA.COM. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE. OUR REGISTRATION NUMBER IS 1944.

Thank you for your support and consideration

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Website: Scbalas.com**