

Ithaca Area Collaborative Law Professionals 2025 Membership Application

IACLCP 2025 dues	\$155	1/1/2025-12/31/2025: includes 4 lunches (one per quarter) in 2025. Dues are not prorated if you join mid-year.
IACP dues	<u>\$145</u>	Required of all members for IACP Whole Group Status; includes Whole Group discount.
Total payment	\$300	Payable to the Ithaca Area Collaborative Law Professionals.

*If you pay your IACP dues via another Whole Group membership, please indicate the name of that practice group below and pay only the dues for the IACLCP membership (\$155)

If you have fulfilled the foregoing requirements for membership, please complete the written pledge below and return this page with your payment for one year's dues of \$300 (payable to Ithaca Area Collaborative Law Professionals) to:

IACLCP
c/o Charles Guttman
411 North Tioga St
Ithaca, NY 14850
607 244 4194

Pledge

I, _____, pledge to comply with and to promote the spirit and written word of the principles of Collaborative Law as set forth in the Participation Agreement.

I will not participate in a collaborative case where all professionals have not gone through the 2-day Basic Introductory Collaborative Law training. (Rare exceptions may be granted, allowing the use of a non-collaboratively trained professional (legal, financial or mental health professional)). All exceptions must be approved by all the professionals and participants in the case. Additionally, the exception must be approved by two IACLCP members who are not active participants in the case.

I understand that a violation of the Principles of Collaborative Law may result in my no longer being a member of the IACLCP.

I certify that I meet the minimum requirements for membership in the IACLCP for my profession.

I pledge to uphold the continuing requirements of membership in the IACLCP during my membership, including attendance at monthly meetings at least once during each quarter (i.e. once every three months).

If renewing, the training(s) I attended in the past year:

- *If applicable: I am a current member of the IACP and my dues are paid by:* _____

Signature: _____ Dated: _____

If you are a new member, please email your name and contact information, as you would like it to appear on the IACLCP web page, (www.collab-law.com) to: Iska Ziver at iska@iskaziver.com.