

UNITED STATES DISTRICT COURT - MIDDLE DISTRICT OF ALABAMA in Montgomery

**IF YOU WERE ADMITTED DURING CALENDAR YEAR 2010**

**you are due to renew by March 1, 2016**

In accordance with the provisions of F.R.CIV.P.5(b)(2)(E), I understand that service, except for original process, will be given to me by electronic means to the e-mail addresses listed above. I agree to waive the provisions of F.R.Civ.P.77(d) and F.R.Crim.P.49 (c) providing service of notice of the entry of an order or judgment by mail and consent that such notice may be served by electronic means. I am a member of the bar in good standing, or permitted by statute or Local Rule to appear without being a member of the bar. I understand that this electronic notice will be in lieu of notice by mail.

\* This CM/ECF system is for use only in cases designated by the US District Court for the Middle District of Alabama.

\* All attorneys who wish to practice in this court must register for Electronic Noticing (E-Service) per General Order 3164.

\* This system may be used by attorneys to file electronic documents. A Users login as issued by the court, combined with the password, serves as and constitutes the attorneys signature.

\* Attorneys must be members in good standing of the bar of this Court, or permitted by statute or Local Rule to appear without being a member of the bar, to file documents electronically.

\* CM/ECF Users agree to abide by the rules and orders of this court and the Civil and/or Criminal Administrative Procedures (available on-line) concerning CM/ECF.

**Application To Continue A Member Of Federal Bar In Good Standing**

PLEASE PRINT OR TYPE			
Mr./Mrs./Ms.	Full First Name	Full Middle Name	Last Name
Alabama Bar Number (include dashes, example: ASB-9999-X44X, where 9999 is the last four digits of the social security number) or other state bar number. <b><u>THIS IS A REQUIRED FIELD</u></b>			
Law Firm/Company Name (if any)			
Mailing Address			
City/State/ZIP Code			
Business Telephone (Include Area Code)		FAX Number (Include Area Code)	
Name When Initially Admitted To Practice or any other names used (if different from above)			
Name As It Appears On Pleadings (if different from above)			

**Registration for CM/ECF - E-Service and E-filing**

Includes Authorization to Send Orders, Judgments, Pleadings and Other Documents by E-Mail

Social Security Number (last four digits): _____ (This information will be maintained confidentially and is necessary for security/confirmation purposes)
If you would like to use the same ECF login from another court, enter here
Email Addresses (first listed will be primary)

I certify that I am a member in good standing of the Alabama State Bar.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

PRINT, COMPLETE, AND MAIL THIS FORM ALONG WITH THE **\$50.00** RENEWAL FEE MADE PAYABLE TO:

CLERK, U.S. DISTRICT COURT  
One Church Street, Suite B-110  
Montgomery AL 36104