

TIDA Attorney Membership Application

If you are interested in becoming an Attorney Member, please complete this application in its entirety.

1 App	olication Process	2	Personal Information and Letter of Recommendation	3	Trucking Industry References	4	Signature	
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Thank you for your interest in membership in the Trucking Industry Defense Association. Membership is open to attorneys with a major portion of their current and active practice dedicated to trucking defense work. Membership dues are \$475 per year. Membership is subject to approval by the Membership Committee.

Please note that a letter of recommendation must be submitted with your application. Your sponsor must be a current TIDA member in good standing. Your sponsor or sponsor firm/company cannot be used as a reference as well.

In addition, please provide three references from both trucking and truck insurance companies relating to your trucking defense work (trucking liability, trucking cargo, trucking coverage and/or trucking workers' compensation) and with whom you have a significant number of active cases. For each client, identify the number of current/active cases that you are handling and the number of closed matters that you have handled within the past year. Your references will be contacted and asked about pending cases you are handling. Please include references with whom you have a significant number of active cases.

You will be contacted approximately 90 days after your completed application is received. If you have any questions or require additional information, please feel free to contact the TIDA office at 410.931.8100.

According to the TIDA Bylaws:

Any member of TIDA, or their organization, firm, subsidiary, affiliate or related business may not represent, consult for or testify on behalf of plaintiffs in a personal injury case against a TIDA industry member or an insured of a TIDA industry member. If any firm or organization has even one individual who violates this provision, the entire firm or organization and all current TIDA members from that firm or organization will have their membership revoked. If the case is dropped or resolved after TIDA membership has been revoked, re-application to TIDA by all those removed will be required. Claims for contribution, indemnity, property damage, workers comp, subrogation, coverage matters and cargo damage are not affected by this provision.

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1 Application Process	Personal information and Letter of Recommendation 3 Trucking Industry 4 Signature
Company *	
24 2 22 2	
Primary Contact Name *	
First Last	
Address *	
Street Address	
Address Line 2	
2000	
City	State / Province / Region
	~
Postal / Zip Code	Country
Work Phone Number *	
——	
*** *** ****	
Other Phone Number	
mail *	
/ebsite	
ressite	
tates Actively Practicing in	(abbrev.): *
ears in Practice *	
webing cases you have to	ind/arbitrated/aradiated in the last
years *	ied/arbitrated/mediated in the last
umber of open truck liabil andling *	lity cases you are currently
verage number of open tro ears *	ucking cases during the last 5
ears -	
here is currently a TIDA M	ember in my firm *
) No	
Yes, please provide nan	ne
low did you hear about T	CIDA
Referred by colleague	
Tradeshow	a service
Ad	
Other	
Other	
lease attach Letter of Re	commendation
Browse No file select	ed.

Trucking Industry References

Please list contact information for three individuals employed by different trucking or truck insurance companies for which you are currently/actively handling cases, in trucking defense work (trucking lability cases, cargo, trucking overage and/or trucking workers' comp) within the past year. References from your sponsor or other members of your sponsor's company or firm are not accepted.

Reference 1
Trucking Company Contact •
First Last
Company Name *
City & State *
Phone Number

Type of Cases you are handling *
Trucking Liability
Cargo Trucking Coverage
Trucking Workers' Compensation
Number of current/active cases: *
Number of closed files handled in the past year: *
What percentage of your overall practice is generated for this reference? *
Reference 2
Trucking or Truck Insurance Company Contact
First Last
Company Name *
City & State *
Phone Number
Type of Cases you are handling *
Trucking Liability Cargo
Trucking Coverage
Trucking Workers' Compensation
Number of current/active cases: *
Number of closed files handled in the past year:
What percentage of your overall practice is generated for this reference? *
Reference 3
Trucking or Truck Insurance Company Contact
First Last
Company Name *
Company Name.
Phone Number
000 000 0000
Type of Cases you are handling *
Trucking Liability
Cargo Trucking Coverage
Trucking Corelage Trucking Workers' Compensation
Number of current/active cases: •
Number of closed files handled in the past year:
What percentage of your overall practice is generated for this reference? *

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Terms

Any member of TIDA, or their organization, firm, subsidiary, affiliate or related business may not represent, consult for or testify on behalf of plaintiffs in a personal injury case against a TIDA industry member or an insured of a TIDA industry member. If any firm or organization has even one individual who violates this provision, the entire firm or organization and all current TIDA members from that firm or organization will have their membership revoked. If the case is dropped or resolved after TIDA membership is revoked, re-application to TIDA by all those removed will be required. (Claims for contribution, indemnity, property damage and cargo damage are not affected by this provision.)

Attorneys in private practice who wish to join TIDA must complete the Attorney application for membership. Only attorneys who regularly defend trucking companies or companies affiliated with the trucking industry and whose law firm does not regularly represent personal injury plaintiffs against the trucking industry are eligible for membership.

Signature *										
Date	,	1 /		1 -						
MM	DD	/	YYYY	H.						

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