



South Dakota Lawyer Referral Service ENROLLMENT AGREEMENT

Mail completed form and payment to:
State Bar of South Dakota - SDLRS
222 East Capitol Avenue, #3
Pierre, SD 57501

Or pay online at: www.findalawyerinsd.com

If you pay online, scan and email this completed form to: findalawyer@sdbar.net

1. I am an active member in good standing of the State Bar of South Dakota.
2. I wish to be a member of the South Dakota Lawyer Referral Service ("SDLRS") and agree to pay a \$50 service fee on an annual basis.
3. Once I receive notice that my payment to SDLRS was received and processed, I will create my referral profile at www.findalawyerinsd.com.
4. The service fee is invoiced to participating attorneys in August. I understand that failure to pay the \$50 fee within 30 days will result in a suspension of referrals until the fee is received.
5. In the event I am suspended from the SDLRS for nonpayment of the invoiced amount, I agree that in order to be reinstated to the SDLRS I will pay the balance owed.
6. My practice is covered by Errors and Omissions Insurance totaling at least \$100,000/\$300,000. My policy is issued through:
Name: _____
Dates of coverage: _____
Limits of coverage: \$ _____ \$ _____
I will maintain such insurance at all times while participating in SDLRS. (You will be required to upload a pdf copy of your insurance declaration page to the SDLRS website to begin receiving referrals.)
7. I will promptly inform the State Bar of South Dakota Bar of any change in my address or phone number.
8. Enclosed is the total amount of \$50, to cover the registration fee for the following Practice Panels:
 1. _____
 2. _____
 3. _____
9. I would like to add the following Practice Panels at the rate of an additional \$20 per panel:
 1. _____ (add \$20)
 2. _____ (add \$20)
 3. _____ (add \$20)
10. If any of the following occur, I hereby agree to a suspension of referrals until final resolution of the matter:
 - a. My license to practice law is suspended for any reason;
 - b. I transfer to inactive status for any reason;
 - c. Formal disciplinary proceedings are initiated against me; or
 - d. A criminal complaint is filed or an indictment returned against me alleging a serious crime as defined in SDCL 16-19-37.
11. In the event I receive a referral through the SDLRS that results in attorney fees, I understand it is strongly encouraged I contribute 7% of those fees to the SD Bar Foundation.

I have read the foregoing and hereby certify that the answers are complete and true to the best of my knowledge.

Name: _____
(Signature) (Print or Type)

Date: _____ Member No.: _____ Amount Enclosed: _____