NEW LONDON COUNTY BAR ASSOCIATION, INC.
LAWYER REFERRAL SERVICE MEMBERSHIP APPLICATION FOR 09/01/2026 – 08/31/2027

Name: _____ Phone:_____

Firm Name:_____

Office Address:_____

Mailing Address:_____

EMAIL: _____
Assistant's email (to schedule appointments for you):_____

INSURANCE: *LRS members are required to carry Professional Liability Insurance.*
Insurance Carrier:_____Exp.Date:_____

SUBJECT MATTER PANELS
You will receive referrals only in those areas checked below

___Administrative
___Admiralty
___Bankruptcy/Creditors
___Business/Corporate
___Civil Rights/Discrimination
___Collections
___Consumer Protection/Defective Products
___Criminal
___Defamation of Character
___Education
___Elder Law/Elder Abuse
___Employment Law/Labor Relations/Wrongful Term.
___Environmental
___Estates/Wills/Trusts
___Family Relations
___Foreclosure
___ Plaintiff ____ Defendant
__General Civil Litigation
__ Federal
__ State
__ Appeals
___Housing
___Landlord ___Tenant
___Identity Theft
___Immigration
___Juvenile Court
___Legal Malpractice
___Mediation
___ Medicaid/Medicare
___Medical Malpractice
___Medical Class Action Litigation
___Motor Vehicle Violations
___Patents/Copyrights/Trademarks
___Personal Injury
___ Tribal
__Mashantucket
__ Mohegan
___Property Damage
___Real Property
___Social Security
___Tax
___Unemployment Compensation
___Vehicle Repair/Mechanic Complaints
___ Veterans' Benefits
___Workers' Compensation
___Zoning/Building Regulations

**Other Specialties: _____
** I am fluent in the following additional languages:_____

I HEREBY CERTIFY THAT I HAVE SUFFICIENT EXPERIENCE IN THE LAW TO COMPETENTLY REPRESENT A CLIENT.

Signed:_____
Name:_____

COMPLETED FORM MUST BE SIGNED AND RETURNED WITH A *$35 CHECK* PAYABLE TO
NLCBA, P.O. BOX 1052, Groton, CT 06340
(860) 889-9384

NEW LONDON COUNTY BAR ASSOCIATION
LAWYER REFERRAL SERVICE PANEL MEMBER AGREEMENT

In consideration for my becoming and continuing as a member of the Lawyer Referral Service (LRS) Panel of participating attorneys, I agree as follows:

1. I am a member in good standing of the New London County Bar Association (current on separate membership dues) and the Connecticut Bar and have not been sanctioned for violating the Rules of Professional Conduct by the Statewide Grievance Committee in the last 5 years.

2. I certify that I will accept only those referrals that I am competent to handle within the Rules of Professional Conduct and in particular Rule 1.1 which reads: A lawyer shall provide competent representation to a client. Competent representation requires the legal knowledge, skill, thoroughness and preparation necessary for the representation.

3. I have read the attached schedule of Lawyer Referral Service Procedures and shall comply with them.

4. I will immediately notify LRS if I no longer maintain my professional liability insurance coverage.

5 (a) A $35.00 non-refundable referral fee is electronically collected from the client prior to the time of the first consultation (except Personal Injury, Workers Compensation, & Social Security cases). Clients are advised that this charge is due to LRS and will be collected by the NLCBA at the time of the referral. In the event the referral fee cannot be prepaid, LRS will notify the attorney and the attorney shall collect $35.00 at the time of the first consultation. The attorney will remit $35.00 to LRS even if he/she forgets to collect it from the client.

(b) Ten percent (10%) of the total attorney's fee received from any referred client, unless the total attorney's fee is $250 or less, shall be promptly remitted to LRS by mail. Compliance with this requirement is expected and will be enforced.

6. I will promptly comply with the periodic reporting requirements necessary to ascertain the status of LRS appointments. I understand that the LRS may conduct client surveys, the responses of which may be compared to mine.

Signed:_____

Name:_ _____

Date: _____

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(860) 889-9384

LAWYER REFERRAL SERVICE PROCEDURES

1. The Lawyer Referral Service (LRS) is available to anyone who needs an attorney and does not have one. When an individual has a legal problem and needs the advice of legal counsel, the individual may call the LRS office of the New London County Bar Association. When a potential client contacts the LRS, a staff member first explains the service offered to the public and advises that a $35.00 non-refundable referral fee is charged, (with the exception of Personal Injury, Workers Compensation and Social Security disability cases).

2. The $35.00 non-refundable referral fee will cover the client's first one-half hour consultation with a participating attorney.

3. If the client would like an appointment scheduled, the LRS staff member conducts a preliminary interview to determine the type of problem and obtain enough information to enable staff to select the appropriate attorney from their files.

4. Following the preliminary interview, the client is advised the LRS will contact a qualified attorney who practices in the area of client's legal issue and with consideration for geographic concerns.

5. LRS staff shall electronically collect the referral fee from the client at the time of the referral. In the event the referral fee cannot be prepaid, LRS will notify the attorney and the attorney shall collect the fee at the time of the first consultation. The attorney will remit the fee to LRS even if he/she forgets to collect it from the client. The client is entitled to his or her one-half hour office or over the phone consultation with the appropriate attorney selected.

6. After the client's request to have an appointment scheduled, the LRS staff member proceeds as follows:
a) On a rotation basis, the LRS staff member checks the attorney's file in the proper category and geographic area. The attorney's office is contacted with the parties' names and brief facts as to the type of problem. If an attorney or his/her staff does not timely respond to the referral, we will move on to another attorney.
b) Once the attorney's office agrees to the referral, LRS staff electronically collects the referral fee and the client is then provided the attorney's contact information. The client is then instructed to contact the attorney's office directly to schedule a mutually convenient time to meet/talk.
c) Once the client has been provided the attorney contact information, an LRS Intake Form will be emailed to the attorney. LRS guidelines require that this form must be completed and returned to the LRS office within 2 weeks.

7. The LRS retains the name and phone number of the client for its records. It reserves the right to communicate directly with the client for the purpose of determining client satisfaction.

DO'S AND DON'TS

DO refer the client back to the LRS if we have erred in referring the client to your office.

DO please remember that the LRS staff members are not attorneys and cannot give any legal advice.

DO collect the $35.00 referral fee if circumstances arise where the fee cannot be prepaid electronically. Please remember, that if the client keeps the appointment and the fee is not collected, then you are responsible for the fee.

DON'T consult with a client by phone unless prearranged by the LRS.

DON'T collect the $35.00 fee for Personal Injury, Workers Compensation and Social Security. In these cases, the $35.00 fee is waived.