



## Hillsborough County Bar Association Court Access Card Application - **ATTORNEY**

### Save time and expedite your entry to the Courthouse with a Court Access Card!

1) Please complete this form and mail it with a copy of your valid driver's license and a check payable to the HCBA to: Hillsborough County Bar Association, 1610 N. Tampa Street, Tampa FL 33602. **The amount is: (a) \$75 for first-time applicants, or (b) \$50 for cardholder renewals.** Additionally, please email your digital photo in .jpg format to [accesscard@hillsbar.com](mailto:accesscard@hillsbar.com). Your new card will be mailed to you in 7-10 days.

Or:

2) Please bring the completed form, your valid driver's license, and a check payable to the HCBA to: 1610 N. Tampa Street, Tampa FL 33602. **The amount is: (a) \$75 for first-time applicants, or (b) \$50 for cardholder renewals.** Additionally, please email your digital photo in .jpg format to [accesscard@hillsbar.com](mailto:accesscard@hillsbar.com), or your photo can be taken at the HCBA.

**Please print clearly. All fields are REQUIRED.**

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Firm Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_

State/Jurisdiction of Bar Membership: \_\_\_\_\_ State Bar Number: \_\_\_\_\_

Are you a member of the Hillsborough County Bar Association? Yes  No

What is the primary county in which you practice? \_\_\_\_\_

I certify that as a condition of issuance of a Court Access Card by the Hillsborough County Bar Association ("HCBA"), I will not allow anyone else to use said card for access to the Hillsborough County Courthouse, nor will I bring into the courthouse articles prohibited by any statute, ordinance, regulation or policy of the state of Florida or the Court and/or the Hillsborough County Sheriff's Office, its officers, employees or agents. Specifically, I will bring no firearms into the courthouse. The Court Access Card does NOT exempt you from screenings and a weapons search. I agree to notify the HCBA promptly should my card be lost or stolen, misplaced, and/or if the information herein changes. I further certify that upon violation of these conditions I will voluntarily surrender said Card and will hold harmless and indemnify the Hillsborough County Sheriff's Office, the Court and the HCBA from any actions relating to any violation of these conditions.

I acknowledge and agree that access to the Hillsborough County Courthouse is subject to the policies and procedures that the Hillsborough County Sheriff's Office or the Court may adopt in its discretion. I further agree that the access card may be revoked or cancelled, or its benefits limited, by the Hillsborough County Sheriff's Office, the Court or the HCBA in its discretion. I release the Hillsborough County Sheriff's Office, the Court and the HCBA from any actions relating to said revocation, cancellation or limitation.

I understand that the HCBA, or its designate, may perform a Florida Department of Law Enforcement criminal history information and background investigation and hereby consent to the same. I understand and agree that the issuance of an Access Card is contingent upon the results of the criminal history information and background investigation.

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

Check One:  First-time Applicant Fee \$75.00  Renewal Applicant Fee \$50.00

Make Check Payable to: Hillsborough County Bar Association (HCBA)

Return Application, Copy of Driver's License, and Check to: Hillsborough County Bar Association  
1610 N. Tampa Street, Tampa FL 33602

Questions: Please contact the HCBA at 813-221-7777 or email [accesscard@hillsbar.com](mailto:accesscard@hillsbar.com).

#### Office Use Only

Photo ID Presented: \_\_\_\_\_ Date of Issue: \_\_\_\_\_ Fee Paid: \_\_\_\_\_