



# Nebraska Paralegal Association

PO Box 24943 Omaha, Nebraska 68124-0943

[www.nebraskaparalegal.org](http://www.nebraskaparalegal.org)

An Affiliate of the National Association of Legal Assistants

## Student Membership Application

First year's dues of \$30.00 must accompany this Application. Thereafter, dues are payable by August 1 of each year and delinquent if not paid by October 1 (fiscal year is October 1 – September 30). There is no proration of dues for partial years.

Name: \_\_\_\_\_ \*E-mail Address: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: (\_\_\_\_\_) \_\_\_\_\_

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

School / Location: \_\_\_\_\_

If employed:

Employer: \_\_\_\_\_ Job Title / Position: \_\_\_\_\_

Employer's Address: \_\_\_\_\_ Work Phone: (\_\_\_\_\_) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Work Fax: (\_\_\_\_\_) \_\_\_\_\_

Are you interested in serving on a NePA committee?  Yes  No If yes, areas of interest: \_\_\_\_\_

\*Note: Meeting notices, annual renewal notices, *In Brief* newsletter and other routine communications from NePA are sent by E-mail. Please provide E-mail address to which you want communications sent.

I hereby apply for Student Membership in the Nebraska Paralegal Association. I agree to be bound by the Code of Ethics and Professional Responsibility of the National Association of Legal Assistants, Inc., and by the Bylaws and Standing Rules as adopted and amended by the Nebraska Paralegal Association. I further understand that this Application is subject to approval by the Board of Directors of the Nebraska Paralegal Association.

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

\_\_\_\_\_  
Signature of Applicant

### SCHOOL ATTESTATION

This section **must** be completed for all applicants for student membership. A student member must be a student in good standing in a legal assistant/paralegal program and have completed at least one quarter/semester in a legal assistant/paralegal program.

I hereby attest that the above-named applicant has completed one quarter/semester in the legal assistant/paralegal program at \_\_\_\_\_ (name of school), and is in good standing.

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

#### For NePA Use Only

Date Received: \_\_\_\_\_ Paid: \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Database: \_\_\_\_\_ Email: \_\_\_\_\_