



Nebraska Paralegal Association

PO Box 24943 Omaha, Nebraska 68124-0943 www.nebraskaparalegal.org

An Affiliate of the National Association of Legal Assistants

Statement for 2011 – 2012 Membership Dues / Renewals

Dues for members of the Nebraska Paralegal Association are due August 1 and delinquent if not paid by October 1 of each year. To renew your membership, please complete the form below and mail it with your check payable to the Nebraska Paralegal Association to:

Nebraska Paralegal Association (or NePA)
P.O. Box 24943
Omaha, NE 68124

(Please print or type and note any recent name changes on this form).

Name: _____ *E-mail Address: _____

Employer: _____ Preferred mailing address for surface mail: Home ___ Office ___

Employer's Address: _____ Home Address: _____

Office Phone: (____) _____ Office Fax: (____) _____ Home Phone: (____) _____

Practice Area(s): _____

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

Is your firm willing to participate in an internship program with area schools that have paralegal programs? ___ Yes ___ No

If yes, please provide a contact name, e-mail and phone number: _____

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

Membership/Dues: _____ Active/\$65 _____ Associate/\$65 _____ Sustaining/\$65 _____ Student/\$30

(See Section 3 of the Standing Rules for qualifications for each membership category. If in doubt of your current status, please contact Kim Hansen, Vice President).

If you are a CP/CLA, date of most recent renewal or original certification _____

If you are an ACP/CLAS,

Specialty area _____ Date certified/renewed _____

Specialty area _____ Date certified/renewed _____

Other professional designation(s): _____

Current professional or business organization memberships: _____

ATTESTATION

(MUST BE COMPLETED BY ALL STUDENT MEMBERS)

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: _____

School Name

By: _____

(Printed Name & Title)

PLEASE NOTE: This form is to be used only for membership renewals. Do not use this form for NEW membership applications. New membership applications are available at www.nebraskaparalegal.org.

For NePA Use Only

Date Received: _____ Paid: \$ _____ Check #: _____ Database updated: _____ Email updated: _____