



For Office Use Only:  
 Date Rec'd: \_\_\_\_\_  
 CC#/Ck. # \_\_\_\_\_  
 Amt. \$ \_\_\_\_\_

**MEMBERSHIP APPLICATION**

NAME: _____		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
HOME ADDRESS: _____	FIRM NAME & ADDRESS: _____	
HOME PHONE: ( ) _____	WORK PHONE: ( ) _____	
HOME FAX: ( ) _____	WORK FAX: ( ) _____	
PERSONAL E-MAIL ADDRESS: _____	WORK E-MAIL ADDRESS: _____	
<input type="checkbox"/> I PREFER TO RECEIVE MY E-MAIL AT HOME.	<input type="checkbox"/> I PREFER TO RECEIVE MY E-MAIL AT WORK.	

Please e-mail me **Employment Listings and Career Resources** updates.  YES  NO  
 Please e-mail me **Project and Event** updates.  YES  NO  
 I am interested in the volunteering for the \_\_\_\_\_ committee.

Certification(s):  
 Area(s) of Law Currently Working In:  
 Paralegal School/Program: \_\_\_\_\_ or  Grandfathered or  Attorney affidavit  
 Years as a Paralegal:  0-3  3-5  5-8  8-12  12-15  15-20  20 +  
 How did you hear about us:  School \_\_\_\_\_  Internet \_\_\_\_\_  
 Referred by a Friend \_\_\_\_\_  Other \_\_\_\_\_

**MEMBERSHIP REQUIREMENTS**

( ) Voting Membership – \$75.00	Voting members are paralegals as defined by B&P Code §6450(c), and must be currently employed full-time. Voting members are eligible to hold office, make motions and vote. Please attach copy of a declaration from your supervising attorney or your office administrator.
( ) Associate Membership – \$70.00	Associate Members are persons who do not meet the criteria of a voting member and/or who is an attorney, secretary or legal administrator. Associate members are ineligible to hold office, make motions or vote. Please attach a copy of your Paralegal Certificate, if applicable.
( ) Student Membership – \$30.00	Student members are current paralegal students or persons who have recently graduated from a paralegal program within the last year. Students are ineligible to hold office, make motions or vote. Please attach a copy of your matriculation or enrollment confirmation letter from the director of paralegal program.
( ) Sustaining Membership – \$225.00	Sustaining members are businesses or law firms. Sustaining members are ineligible to hold office, make motions or vote.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.  
 SIGNED \_\_\_\_\_ DATED \_\_\_\_\_

Please mail this Membership Application with requisite proof of eligibility and check or money order to:  San Diego Paralegal Association 501 W. Broadway, Ste. A #220 San Diego, CA 92101	To pay by credit card, please provide the following information and email to <a href="mailto:Membership@sdparalegals.org">Membership@sdparalegals.org</a> : Name on Card: _____ Card Type: Visa MC Discover American Express Card No.: _____ Card Expiration Date: _____ CCV: _____
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