



Greater Memphis Paralegal Alliance
An affiliate of the National Associations of Legal Assistants, Inc.

P.O. Box 3846
Memphis, Tennessee 38173
Email: GMPAContact@gmail.com

www.paralegalsofmemphis.org

2019 STUDENT MEMBERSHIP APPLICATION AND REQUIREMENTS

Student membership is open to any individual who is enrolled as a student, in good standing, in any accredited Paralegal school or program pursuing a Paralegal degree or certification, provided that the individual is not employed fulltime as a Paralegal. Student members shall not be entitled to vote and may not hold office but **may serve on committees**. Attestation from the program director is required for student membership in GMPA.

Return completed application with your remittance and documentation (if required) to GMPA Membership, P.O. Box 3846, Memphis, Tennessee 38173 or bring to a CLE meeting. CLE meetings are usually held on the third Wednesday of each month, except October and December.

2019 Monthly CLE Luncheon Fees: **Members \$20.00 (if not prepaid)**
 Nonmembers \$25.00

All members have the option to pre-pay their CLE luncheon fees for the year and receive a 10% discount. If you or a representative plan to attend all meetings, please consider taking advantage of this option for your convenience and savings. If you plan to attend select meetings, as a GMPA member, you may pay the member rate for the meetings you attend.

\$ _____ Student Member Dues – New and renewing student member dues is \$25.00.
(Membership only, does not include CLE luncheon fees)

\$ _____ Prepaid CLE luncheon fees - \$180.00 (optional with 10% discount)
(Includes 10 monthly meetings; no meetings held in October and December; does not include annual seminar.)

Total Submitted: \$ _____

Print Name: _____



2019 GMPA STUDENT MEMBER CONTACT INFORMATION
(To be completed by all new and renewing student members)

PLEASE PRINT OR TYPE

Full Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Name of School: _____

Do you work? Yes Fulltime Part-time No

Employer: _____

Work Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Preferred email address: _____

(All GMPA correspondence will be by email. Please notify GMPA of any changes at GMPAContact@gmail.com)

Additional/alternative email: _____

Type of Membership Application: Renewal New

Number of years as GMPA member: _____ NALA Member: Yes No

APPLICANT ATTESTATION

All GMPA members shall be bound by the Code of Ethics and Professional Responsibility as adopted by the National Association of Legal Assistants, Inc. ("NALA"), which includes being governed by the ABA Model Code of Professional Responsibility and the ABA Model Rules of Professional Conduct. These can be found at www.nala.org. By signing below, you agree to be bound as stated above.

Student Signature: _____ Date: _____

STUDENT/PROGRAM DIRECTOR ATTESTATION

I hereby attest that _____, an applicant for student membership in GMPA is currently enrolled in the Paralegal program/course of study at _____.

Length of Paralegal Training Program: _____ Expected Date of Graduation: _____

Accredited By: _____

Address _____

City: _____ State: _____ Zip: _____ Phone: _____

Is the program certified by the American Bar Association? Yes No

Name of Program Director (please print): _____

Signature of Program Director: _____ Date: _____

Signature of Student: _____ Date: _____