



Nebraska Paralegal Association (NePA)

PO Box 24943, Omaha, NE 68124-0943

www.nebraskaparalegal.org

An Affiliate of NALA, The Paralegal Association (NALA)

Renewal Statement for 2017-2018 Membership Dues

Annual dues for members of NePA are due and payable August 1 of each year and delinquent if not paid by October 1 of each year. To renew your membership, please complete the form below and send payment to NePA, P.O. Box 24943, Omaha, NE 68124. You can also email your completed form to sandi.armstrong@koleyjessen.com and pay online by going to the "Payments" tab of www.nebraskaparalegal.org

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

A. Name: _____ Email Address*: _____
Employer: _____ Home Address: _____
Employer's Address: _____
Practice Area(s): _____
Office Phone: (____) _____ Home Phone: (____) _____
ARE YOU INTERESTED IN SERVING ON A NEPA COMMITTEE? _____ Yes _____ No
If Yes, please indicate which committee(s) below:
Mid-Year/Annual Meeting, Seminar/CLE _____ Official Publications _____ Website _____
Audit _____ Public Relations/NSBA Liaison/Law Day _____ Ad Hoc CP Review Course _____
Library _____ CP/ACP Scholarship _____ Ad Hoc Sponsorship _____
Membership _____ Student Education Award _____ Ad Hoc Distance Membership _____
Nominations/Elections _____ Student Services & Mentoring _____ Ad Hoc Technology _____
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, email address and telephone number: _____

*(NOTE: All NePA communications are sent by email. Please provide the email address to which you want communications sent.)

B. Membership/Dues. Please see Section 3 of the NePA Standing Rules for qualifications required for each membership category. (If you are a first-time applicant, please use the relevant membership application form found on NePA's web-site.)

_____ Active/\$65 _____ Distance/\$40 _____ Associate/\$65 _____ Student/Free

C. If you hold a CP/CLA credential, please list date of original certification and most recent renewal, if applicable: _____

If you hold an ACP/CLAS credential, please list the following:
Specialty area _____ Date certified/renewed _____
Specialty area _____ Date certified/renewed _____

Other professional designation(s): _____

Current professional or business organization memberships: _____

D. ATTESTATION

(MUST BE COMPLETED BY ALL STUDENT MEMBERS)

I, _____, do hereby attest that the above-named applicant has completed one quarter/semester in the legal assistant/paralegal program at _____, and is currently in good standing.

Date: _____ SCHOOL NAME: _____

By: _____

Title: _____

For NePA Use Only

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

Revised 08/2017