



# Nebraska Paralegal Association (NePA)

PO Box 24943, Omaha, NE 68124-0943

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

An Affiliate of the National Association of Legal Assistants, Inc. (NALA)

## Membership Dues/Renewal Application

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. You may pay online at <http://nebraskaparalegal.org/payments.php> or by sending a check made out to NePA to the address below. You must also complete the below form and email it to [membership@nebraskaparalegal.org](mailto:membership@nebraskaparalegal.org) or mail it to:

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

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

A. Name: \_\_\_\_\_ E-mail Address\*: \_\_\_\_\_  
Employer: \_\_\_\_\_ Home Address: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_

Practice Area(s): \_\_\_\_\_  
Office Phone: (\_\_\_\_) \_\_\_\_\_ Office Fax: (\_\_\_\_) \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Are you interested in serving on a NePA committee? \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, please indicate which committee(s) below:

Continuing Legal Education _____	Official Publications _____	Student Education Award _____
Audit _____	Public Relations _____	Student Membership _____
Membership _____	CP/ACP Scholarship _____	Technology _____
Nominations/Elections _____	Sponsorship _____	

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 E-mail. Please provide the E-mail 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 website.)**

\_\_\_\_\_ Active \_\_\_\_\_ Distance \_\_\_\_\_ Associate \_\_\_\_\_ Student

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 _____
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 IF ANOTHER FORM PROVING STATUS IS NOT PROVIDED)

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 07/2020