



RESEARCH TRIANGLE PARALEGAL ASSOCIATION, INC. MEMBERSHIP APPLICATION



I hereby apply for General/Associate/Patron* membership in the Research Triangle Paralegal Association ("RTPA") and agree to be bound by the Code of Ethics and Bylaws as adopted by the RTPA.

Name: _____

Street Address: _____

City: _____ **County:** _____ **State:** _____ **Zip:** _____

Phone: _____ **Email:** _____

Employer: _____

Title: _____ **Area of Practice:** _____

Street Address: _____

City: _____ **County:** _____ **State:** _____ **Zip:** _____

Phone: _____ **Email:** _____

Preferred mailing address: Home Business **Preferred email address:** Home Business

Dated: _____

Applicant's Signature

*Please Check One Option Below. *Note: General and Associate Member applicants must also complete page 2.*

- General Member:** A person shall be eligible to become a General Member of this Association provided such person either resides in or is employed in Durham, Orange, or Wake County, North Carolina, and has either (i) completed at least one (1) year of continuous on-the-job training as a paralegal under the direct supervision of a licensed attorney; or (ii) completed a paralegal training school or program and is or has been employed as a paralegal under the direct supervision of a licensed attorney within the past five (5) years. General Members shall be entitled to vote at all meetings of the Association and may hold elected office or serve as a Committee Chair.
- Associate Member:** A person shall be eligible to become an Associate Member of this Association provided such person either resides in, is employed in, or is a paralegal educator or student in a paralegal training school or program in Durham, Orange, or Wake County, North Carolina, and is either (i) employed under the direct supervision of a licensed attorney as a paralegal but has been so employed for less than one (1) year; (ii) a graduate of a paralegal training school or program, provided such training was completed within the past five (5) years, but has not been employed under the direct supervision of a licensed attorney; (iii) an educator associated with a paralegal training school or program; or (iv) enrolled as a student in a paralegal training school or program and is devoting at least half-time to a degree or certification program. Associate Members shall not be entitled to vote at meetings of the Association and may not hold elected office. Such members may, however, serve on committees. Associate Members who become eligible for General Membership may change their classification by notice to the Membership Chairman and payment of the difference between the Annual Dues specified for General and Associate Members in Article V of the Association's bylaws.
- Patron Member:** Patron Members shall be those persons, firms and companies who express interest in giving added support to the goals and programs of RTPA by paying such annual dues as may be set by the Board. Patron Members shall not be entitled to vote at membership meetings of RTPA and may not hold office. Such members may, however, designate representatives to serve as voting members of committees.

MEMBERSHIP DUES SCHEDULE

\$20 GENERAL MEMBERSHIP / \$10 ASSOCIATE MEMBERSHIP / \$200 PATRON MEMBERSHIP

RTPA's fiscal year is January 1 through December 31. All Annual Dues are payable to the Association on March 1 and are delinquent on April 1. If application for membership is made after September 1, the Annual Dues to be paid shall be prorated to half of the amount otherwise applicable.

General and Associate Member Applicants please complete the applicable section(s) below:

EDUCATIONAL BACKGROUND

(To be completed by applicants who have completed a paralegal program.)

Name of Institution: _____

Date of Graduation: _____

Field of Study: _____

ATTORNEY-EMPLOYER ATTESTATION

(To be completed by employers of applicants who have not completed a paralegal program.)

I hereby attest that _____
is currently employed by me as a paralegal and has been employed by me for _____
(years/months). I further attest that the applicant's ethical and professional conduct is
above reproach, and that (s)he is recommended for membership in the Research
Triangle Paralegal Association.

Dated: _____
Attorney-Employer

EMPLOYMENT HISTORY

*(To be completed by applicants who are not currently employed as a paralegal under the
direct supervision of a licensed attorney.)*

Law Firm/Company: _____

Address (City and State Only): _____

Number of years as a practicing paralegal: _____

To ensure speedy processing of your application, be sure to complete all applicable information and
enclose your membership fee check.

Mail completed application and membership fee to:
Erin B. Galloway, President
Research Triangle Paralegal Association
2532 Toll Mill Ct.
Raleigh, North Carolina 27606