

## RESEARCH TRIANGLE PARALEGAL ASSOCIATION, INC. MEMBERSHIP APPLICATION

03 03 80 80

I hereby apply for General/Associate/Patron/Sustaining\* 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.

Street Address:			
City:	County:	State:	Zip:
Phone:	Emai	l:	
Employer:			
Title:	Area	of Practice:	
Street Address:			
City:	County:	State:	Zip:
Phone:	Emai	l:	
Preferred mailing add	dress:  Home  Business	Preferred email	address:  Home  Business
Indicate desired Comr	nittee:	(see website for lis	t of Committees: www.rtpanc.org)
Dated:			
	Applic	cant's Signature	
*Please Check One Option Belo	w. Note: General and Associate Member appli	icants must also complete p	age 2.
Durham, Orange, or Wake of under the direct supervision paralegal under the direct sof the Association and may  Associate Member: A persor	County, North Carolina, and has either (i) comp n of a licensed attorney; or (ii) completed a upervision of a licensed attorney within the pas hold elected office or serve as a Committee Ch n shall be eligible to become an Associate Mem	leted at least one (1) year of paralegal training school of the (5) years. General Mair.	such person either resides in or is employed in of continuous on-the-job training as a paralegal r program and is or has been employed as a embers shall be entitled to vote at all meetings ided such person either resides in, is employed as a Wake County North Carolina, and is either
(i) employed under the dire of a paralegal training school direct supervision of a licen paralegal training school or to vote at meetings of the who become eligible for Ge	ct supervision of a licensed attorney as a para ol or program, provided such training was comp sed attorney; (iii) an educator associated with program and is devoting at least half-time to a Association and may not hold elected office.	legal but has been so emplo pleted within the past five ( a paralegal training school a degree or certification pro Such members may, howe ion by notice to the Membe	or Wake County, North Carolina, and is either byed for less than one (1) year; (ii) a graduate (5) years, but has not been employed under the or program; or (iv) enrolled as a student in a gram. Associate Members shall not be entitled ever, serve on committees. Associate Members ership Chairman and payment of the difference is bylaws.
programs of RTPA by payin		d. Patron Members shall n	est in giving added support to the goals and ot be entitled to vote at membership meetings s voting members of committees.

Revised 10/15/2018

Name:

Sustaining Member:	Sustaining Members s	hall be those persor	s, firms and comp	anies who exp	ress interest in gi	ving added suppo	rt to the goals and
programs of RTPA	by paying such annua	Il dues as may be s	set by the Board.	Sustaining M	embers shall not	be entitled to vo	te at membership
meetings of RTPA a	nd may not hold office	. Such members ma	y, however, desig	nate represent	atives to serve as	voting members	of committees.

## **MEMBERSHIP DUES SCHEDULE**

\$20 GENERAL MEMBERSHIP / \$10 ASSOCIATE MEMBERSHIP / \$275 PATRON MEMBERSHIP/ \$75 SUSTAINING MEMBERSHIP Paralegal Student Members may join at no charge

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
Dated: Attorney-Employer
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, complete all applicable information and enclose your membership fee check. **Make checks payable to "Research Triangle Paralegal Association"**.

Mail completed application and membership fee to:

Attn: Sue Atti/RTPA President 16224 NC Hwy 210 Angier, NC 27501