



2010 MEMBERSHIP APPLICATION

REGULAR membership is open to any person who is: (1) an Illinois resident employed as a paralegal on a full-time basis in the State of Illinois; or (2) a non-Illinois resident employed as a paralegal on a full-time basis in the State of Illinois; or (3) an Illinois resident employed as a paralegal on a full-time basis in any State contiguous to Illinois. Regular Membership is \$65.00

STUDENT membership is open to (1) any Illinois resident who is enrolled in a formal course of paralegal study from an accredited institution in pursuit of a certificate or degree and is not working as a paralegal; or (2) to any non-Illinois resident residing in a state contiguous to Illinois, and who is also enrolled in a formal course of paralegal study from an accredited institution in Illinois in pursuit of a certificate or degree and is not working as a paralegal. Student Membership is \$40.00 (Please list name of School)

ASSOCIATE membership is open to (1) any person employed as a paralegal on a part-time basis in the State of Illinois; or (2) any person formerly employed as a paralegal; or (3) any graduate of a formal course of paralegal study from an accredited institution who is seeking a paralegal position. Associate Membership is \$55.00

SUSTAINING membership is open to any person, law firm, business, educational institution or other organization interested in furthering the purposes of the Association. Sustaining Membership is \$95.00

Definition: A paralegal is a person qualified through education, training, or work experience to perform substantive legal work that requires knowledge of legal concepts and that is customarily, but not exclusively, performed by an attorney. This person is retained/employed by an attorney, law office, governmental agency, or other entity under the supervisory authority of an attorney; or is authorized by governmental administrative agency or statutory or court authority to perform this work.

First Name Middle Initial Last

Employer Home Address

Work Street Address Home City, State, Zip

Work City, State, Zip Home Telephone #

Work Telephone # E-mail Address

ADDRESS INFORMATION table with columns for Business, Residence, In the Mail, Via Email

Form with checkboxes for New, Renewal, and experience requirements

AREAS OF PRACTICE SPECIALIZATION (check applicable areas) grid

I hereby certify that I meet the criteria of the membership class and the definition of a paralegal. I affirm that I am not a disbarred or suspended attorney, and that I have not been found to have engaged in the unauthorized practice of law.

Signature Date

Dues are assessed on a calendar year basis. Membership of those joining after November 1 shall extend through the end of the next calendar year.

Mail a check or money order to the Post Office box. Or, for credit card payment, complete portion below and, fax your application to 815/462-4696. Includes fields for Name on Card, Billing Address, Card Number, Expiration, Security Code, and Signature.

REFERRED BY: