

Membership Period: 01/01/20 thru 12/31/20

Student Membership Dues Enclosed: \$25

A \$35.00 charge will be assessed for all NSF checks

SAN ANTONIO PARALEGAL ASSOCIATION  
Board Use Only

Entered Date: \_\_\_\_\_  
Rec'd Date: \_\_\_\_\_  
Approved By: \_\_\_\_\_  
Dues Paid: \_\_\_\_\_  
Name on Check: \_\_\_\_\_  
Check#: \_\_\_\_\_

**SAN ANTONIO PARALEGAL ASSOCIATION**  
**STUDENT MEMBERSHIP APPLICATION**  
**(NON-VOTING MEMBER CLASS)**

**INSTRUCTIONS:** Return the completed Application for Student Membership with dues check made payable to SAN ANTONIO PARALEGAL ASSOCIATION to: Membership Director, SAN ANTONIO PARALEGAL ASSOCIATION, P.O. Box 90037, San Antonio, TX 78209. Please send questions to [membership@saparalegal.org](mailto:membership@saparalegal.org).

AREA(S) OF INTEREST IN THE LEGAL FIELD: \_\_\_\_\_

NAME: _____	DOB: _____	CELL#: _____
EMPLOYER: _____	BUSINESS PHONE: _____	
JOB TITLE: _____	BUSINESS FAX: _____	
WORK ADDRESS: _____	CITY: _____	STATE: _____ ZIP: _____
HOME ADDRESS: _____	CITY: _____	STATE: _____ ZIP: _____
EMAIL ADDRESS: _____	HOME PHONE: _____	
*NOTE: An E-mail address is necessary to receive announcements and SAPA'S monthly newsletter.		
REFERRED BY: _____		
I would like any mailings to be sent to my: <input type="checkbox"/> HOME <input type="checkbox"/> OFFICE		

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

**Enrollment Verification**

This is to verify that the above-named applicant is enrolled as a student in the \_\_\_\_\_  
\_\_\_\_\_ Program, and is in good standing, with an expected completion date of \_\_\_\_\_.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Authorized School Representative

\_\_\_\_\_  
Printed Name of Authorized School Representative

\_\_\_\_\_  
Title of Authorized School Representative

*Your membership privileges include reduced CLE luncheon rates, subscription to the monthly newsletter, and access to the Job Bank.*

## STUDENT MEMBERSHIP (NON-VOTING MEMBER CLASS)

**Qualifications:** A person eligible for Student Membership shall be a person who is a student in good standing at any accredited approved university, college, junior college, or other institution or post-secondary school pursuing a course of study as a Paralegal. Such course of study must require resident courses or classes for completion of such Paralegal program.

**NOTE: A Student Member, who becomes eligible for either an Associate Membership or Voting Membership, must upgrade his/her membership to that of an Associate Member or a Voting Member.**

Student Members in good standing may fully participate in the social and educational affairs of SAN ANTONIO PARALEGAL ASSOCIATION, but shall not have the right to vote, hold office or directorship as a voting Board member, or participate in the business affairs of SAN ANTONIO PARALEGAL ASSOCIATION unless such right or rights is/are granted to a Non-Voting Member by the Board.

Student Members are prohibited from using membership in SAN ANTONIO PARALEGAL ASSOCIATION for the purposes of marketing or supplying products or services to the legal profession, except those services offered by a Non-Voting Member as an intern or freelance Paralegal.

Date: \_\_\_\_\_

By: \_\_\_\_\_

Applicant's Signature