



Under what category of Membership do *you* fall?

Types of membership available:

Active Member **Student Member** **Associate Member** **Patron Member**

ARTICLE IV - Membership

4.1 Classification of Membership. There shall be the following classes of membership in CFPA:

A. **Active Member**: Only Active Members shall be entitled to vote, hold office, or serve on the Board of Directors. A person may qualify for Active Membership in more than one of the Active Membership categories listed below. These Active Membership categories shall include any person who has:

(1) Successfully completed the Certified Legal Assistant (CLA)/Certified Paralegal (CP) examination of NALA, or the Paralegal Advanced Competency Exam (PACE) examination of the National Federation of Paralegal Associations (NFPA); or

(2) Registered with the Florida Bar as a Florida Registered Paralegal (FRP); or

(3) Graduated from an ABA-approved program of study for paralegals, and who at the time of the initial membership application, and for any subsequent annual renewal of membership, has submitted an attorney attestation of qualification and experience as a paralegal, and attesting to the applicant having worked as a paralegal for at least 960 hours during the two years prior to the initial or renewal application. The attestation shall be in the format as specified in CFPA's Standing Operating Procedures manual; or

(4) Graduated from a course of study for paralegals which is institutionally accredited but not ABA-approved, and which requires not less than the equivalent of 60 semester hours of classroom study, and who at the time of the initial membership application, and for any subsequent annual renewal of membership, has submitted an attorney attestation of qualification and experience as a paralegal, and attesting to the applicant having worked as a paralegal for at least 960 hours during the two years prior to the initial or renewal application. The attestation shall be in the format as specified in CFPA's Standing Operating Procedures manual; or

(5) Graduated from a course of study for paralegals other than those set forth in subsections (3) and (4) above, plus not less than six months of in-house training as a paralegal, and who at the time of the initial membership application, and for any subsequent annual renewal of membership, has submitted an attorney attestation of qualification and experience as a paralegal, and attesting to the applicant having worked as a paralegal for at least 960 hours during the two years prior to the initial or renewal application. The attestation shall be in the format as specified in CFPA's Standing Operating Procedures manual; or

(6) Received a baccalaureate degree in any field, plus not less than six months in-house training as a paralegal, and who at the time of the initial membership application, and for any subsequent annual renewal of membership, has submitted an attorney attestation of qualification and experience as a paralegal, and attesting to the applicant having worked as a paralegal for at least 960 hours during the two years prior to the initial or renewal application. The attestation shall be in the format as specified in CFPA's Standing Operating Procedures manual; or

(7) Has a minimum of three years of law-related experience under the supervision of an attorney, including at least six months of in-house training as a paralegal, and who at the time of the initial membership application, and for any subsequent annual renewal of membership, has submitted an attorney attestation of qualification and experience as a paralegal, and attesting to the applicant having worked as a paralegal for at least 960 hours during the two years prior to the initial or renewal application. The attestation shall be in the format as specified in CFPA's Standing Operating Procedures manual; or

(8) A minimum of two years of in-house training as a paralegal, and who at the time of the initial membership application, and for any subsequent annual renewal of membership, has submitted an attorney attestation of qualification and experience as a paralegal, and attesting to the applicant having worked as a paralegal for at least 960 hours during the two years prior to the initial or renewal application. The attestation shall be in the format as specified in CFPA's Standing Operating Procedures manual

B. **Student Member**: Any person may be a Student Member while they are a full or part time student in good standing majoring in a law-related course of study, provided that the person is not employed as a paralegal. Upon successful completion of the course of study, Student Members may qualify to apply for Active or Associate membership. Student Members have no voting rights and shall not serve as an Officer, Director, or Committee Chair, but may participate on any Committee or Sub-Committee and may serve as Parliamentarian.

C. **Associate Member**: Any person may be an Associate Member who has current law related experience, such as legal secretaries, attorneys, judicial assistants, legal studies educators or recent graduates of a law related degree program who is not employed as a paralegal. Associate Members have no voting rights and shall not serve as an Officer, Director, or Committee Chair, but may participate on any Committee or Sub-Committee and may serve as Parliamentarian.

D. **Patron Member**: Any persons who are members of bar associations or working in the educational field endorsing the paralegal concept or involved in the promotion of the paralegal profession, and those persons, companies, firms, vendors, or institutions interested in supporting the organization, may become Patron Members. Patron Membership does not include any individual who would otherwise be qualified as an Active or Associate Member. Patron Members have no voting rights and shall not serve as an Officer, Director, Parliamentarian or Committee Chair, but may participate on any Committee or Sub-Committee.



CENTRAL FLORIDA PARALEGAL ASSOCIATION

P.O. BOX 1107 • Orlando, FL 32802

(407) 672-6372 • www.cfpainc.org

NEW MEMBERSHIP APPLICATION

To be completed and returned by all applicants. Data entries into **Section I** for Active, Associate and Student Membership, **Section II** for Active and Associate Membership, **Section III** for Student Membership only. Only **Section IV** to be completed for Patron Membership. All applicants sign on page 3. Dues are not pro-rated. Applications postmarked January 1 through June 30 will be considered full year memberships. Applications postmarked July 1 through December 31 will be considered half year memberships for the current calendar year. The amount set forth below includes a one-time \$10.00 initiation fee. **Please indicate which membership category you are seeking by highlighting below:**

(Full Year Price/Half Year Price)

Active: (\$60.00/\$30.00) Student (\$30.00/\$15.00) Associate (\$50.00/\$25.00) Patron (\$85.00/\$42.50)

Section I: Active/Associate/Student Membership

| | | | |
|----------------------------|----------------------------|----------------------------|------------------------------|
| Name: | | | |
| Home Address: | | | |
| City: | | State: | Zip: |
| Home Phone: | | Home Email: | |
| Employer: | | | |
| Work Address: | | | |
| City: | | State: | Zip: |
| Work Phone: | | Work Email: | |
| Preferred Mailing Address: | <input type="radio"/> Home | <input type="radio"/> Work | <input type="radio"/> School |
| Preferred Email Address: | <input type="radio"/> Home | <input type="radio"/> Work | <input type="radio"/> School |

*Continue to **Section II** for Active/ Associate Membership, or **Section III** for Student Membership*

Section II: Active/Associate Membership

| | | | |
|---------------------------------------------------------------|---------------------------------|----------------------------------|------------------------------|
| Employer Name: | | Area(s) of Specialty: | |
| Number of Attorneys: | Number of Paralegals: | Years as Paralegal: | Work Fax: |
| Certification: | <input type="checkbox"/> CLA/CP | <input type="checkbox"/> ACP | <input type="checkbox"/> FCP |
| | <input type="checkbox"/> FRP | <input type="checkbox"/> NFPA-RP | <input type="checkbox"/> CBA |
| | <input type="checkbox"/> NALA | <input type="checkbox"/> Other: | |
| Member # | # _____ | # _____ | # _____ |
| University / College Attended: | | Major: | |
| Degree: | | Date Graduated: | |
| Other formal or special training or education or credentials: | | | |

Please check the active membership qualification number (from above) under which you are applying and include documentation (i.e., diploma, CLA Certificate, and/or employer attestation).

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*******Paralegals with CP or FRP Designations
are NOT required to complete Attestation*******

Attorney/Employer Attestation for Active Member (Currently Employed)

I hereby attest that _____ is and has
been employed by _____
(Firm/Company Name) as a paralegal or in another capacity performing substantive
legal work since _____ and that he/she has worked as a paralegal
for at least 960 hours during the two years prior to this renewal application.

Signature:

Date: _____

Name of Attorney/Employer (please print)

Attorney/Employer Attestation for Active Member (Currently Unemployed/Laid-Off)

I hereby attest that _____ was
employed by _____
(Firm/Company Name) as a paralegal or in another capacity performing substantive
legal work from _____ to _____ and that he/she has
worked as a paralegal for at least 960 hours during the two years prior to this renewal
application.

Signature:

Date: _____

Name of Attorney/Employer (please print)

Section III: Student Membership Only

| | | |
|--------------------------|------------------------------|------|
| School Attending: | | |
| Program/Major: | Expected Date of Graduation: | |
| School Address: | | |
| City: | State: | Zip: |
| Work Phone: | Work Email: | |
| School Activities/Clubs: | | |

School Attestation

I hereby attest that _____ is currently enrolled in the legal assistant/paralegal program listed above. I further attest that said applicant is of professional and honest character.

Signature: _____ Date: _____

Name of Program Director or Instructor (please print)

Section IV: Patron Membership

| | | |
|------------------------|-----------------------------------|--------|
| Name of Firm/Business: | | |
| Contact Person: | # of Paralegals on staff, if any: | |
| Type of Business/Firm: | | |
| Address: | | |
| City: | State: | Zip: |
| Phone: | Fax: | Email: |

Opportunities for Involvement

I would like more information on: Meetings Committees Seminars Other:

Other: _____

Signature

I attest the information provided herein is correct and accurate.

Signed: _____ Date: _____

Referred By: _____

PayPal is available at <http://cfpainc.org/membership/applyformembership.html>

Return this New Member Application Form with your check or PayPal receipt to:

Central Florida Paralegal Association
Post Office Box 1107
Orlando, Florida 32802

Save
\$5

Member Referral Incentive: When a current CFPA Member refers a non-member for membership and a non-member is approved for CFPA Membership, the current CFPA Member will receive \$5.00 off a CFPA CLE Seminar.

New Member: _____ Date Approved: _____

Referring Member: _____ Membership Director: _____

NOTE: To be valid, current CFPA Member name must appear on non-member's membership application. *To redeem you must present this coupon to the CLE Chair.*

Offer valid for 3 Months upon non-member being approved. Referral incentive is non-transferrable.