



Santa Barbara Paralegal Association

2020 Membership Application

Date: _____

New Member

Renewing Member

Name: _____

Mailing address: _____

E-mail: _____ Birth Day & Month: _____

Tel:(Work) _____ (Home) _____ (Cell) _____

Employer: _____

Address: _____

Area of Law: (i.e. Probate / Estate Planning; Criminal; Litigation, etc.) _____

Membership term is 12 months starting 01/01/2020 to 12/31/2020. Early Bird Special applies to applications received with post-mark date of 10/31/2019 through 11/15/2019.

Please select type of membership for which you are applying.

- Active (voting) \$75.00 (\$60 Early Bird Special)** – All currently practicing paralegals and legal assistants who comply with California Business and Professions Code Section 6450 provisions and who so certify to SBPA.

I declare under penalty of perjury under the laws of the State of California that I have read and understand the provisions of California Business and Professions Code Section 6450 and hereby certify that I have met and continue to qualify as a paralegal or legal assistant, as those terms are defined under the code. I understand that misrepresentation is grounds for revocation of active membership status.

Dated _____ Signature _____

- Associate (non-voting) \$75.00 (\$60 Early Bird Special)** – Legal assistants and paralegals who currently are non-compliant with California Business and Professions Code Section 6450, members of a bar association, legal educators, legal secretaries, other legal staff and law school students who support or are involved in the promotion of the paralegal / legal assistant profession.
- Student (non-voting) \$45.00 (\$30 Early Bird Special)** – Persons presently enrolled and participating in a paralegal certificate or degree program which meets the requirements of California Business and Professions Code Section 6450. Enrolled in program at: _____
- Sustaining (non-voting) \$130.00 (\$115 Early Bird Special)** – Any person or business entity endorsing the paralegal concept and supporting the goals of the **Santa Barbara Paralegal Association**.

I hereby certify that I qualify for the class of membership designated.

Dated _____ Signature _____

Please check any activities with which you would like to assist:

Education Membership Public Relations 2020 MCLE Conference

Are you interested in becoming a board member next year? Yes No

Make check payable to SBPA and mail with the membership application to:

SBPA | P.O. Box 2695 | Santa Barbara, CA 93120-2695
or register online at: <http://santabarbaraparalegals.org/membership/>

Thank you for joining SBPA!