

Gate City Bar Association Paralegal Section Membership Application

MEMBERSHIP LEVEL

Active Member \$40.00

Student Member \$20.00

PLEASE PRINT

Home Contact Information

Name _____

Home Address _____

City/State/Zip _____

Home Phone _____ Cell Phone _____

Preferred Email Address _____

Work Contact Information

Employer Name _____

Employer Address _____

City/State/Zip _____

Employer Office Phone _____ Cell Phone _____

Employer Email Address _____

Legal Practice Area _____

Years of Experience _____ years _____ months

Student Information

Name of College/University _____

Highest Level of Education _____

(Expected) Graduation Date ____/____/____

Please visit our website www.gatecitybar.org click paralegal section to pay via PayPal

