

**OCTOBER 1, 2017-SEPTEMBER 30, 2018
APPLICATION FOR NEW MEMBERSHIP**

Name _____ Telephone (____) _____
 Address: _____ (Street) _____ (City/State) _____ (Zip)
 Email: _____ Birthday _____ (month/day)
 Employer _____ Employer's Address _____

I hereby apply for membership in the Ventura County Paralegal Association, Inc. (VCPA) for the fiscal year beginning October 1, 2017 through September 30, 2018, as an:

() Active/Voting Member* () Associate Member () Student Member** () Sustaining Member

Have you ever been convicted of a felony? _____ How did you become acquainted with VCPA? _____

If application approved, all communications will be sent to your email account provided above.

Please circle any committee that interests you:

Fund Raising Historian CLA/CP Workshop Employment Law Day/5K Run Education/Scholarship
 Newsletter Publicity Seminars/Workshops Website Winetasting/Auction Recruiting Sponsors

I agree to be bound by the Code of Ethics and Professional Responsibility of the National Association of Legal Assistants and the California Alliance of Paralegal Associations and the Bylaws of VCPA, as adopted. I further understand that this application is subject to approval by the Board of Directors of VCPA

Dated: _____ Signature: _____

TO BE COMPLETED BY APPLICANTS FOR ACTIVE OR ASSOCIATE MEMBERSHIP

Area of practice of special interest: _____ Period employed as a paralegal: _____

Description of duties or business: _____

Name/Title of immediate supervisor: _____ Period in the legal field _____

Formal/specialized education (name and address of school) or specific training for present position: _____

Degrees/Certificates Earned: _____ Dates of Completion: _____

Current Professional/Business organizational memberships: _____

ATTORNEY-EMPLOYER ATTESTATION

**Must be completed if applying for active membership and has no certificate of completion from a paralegal program approved by the American Bar Assoc., as referenced in Business & Professions Code §6450.*

I hereby attest that _____ has a baccalaureate degree or an advanced degree and a minimum of 1 year of law-related experience under the supervision of an attorney.

I hereby attest that _____ has a high school diploma and has a minimum of 3 years of law-related experience under the supervision of attorney not later than 12/31/2003.

This applicant is a paralegal and performs paralegal tasks, under the direction and supervision of an attorney, including, but not limited to, case planning, development and management; legal research; interviewing clients; fact gathering and retrieving information; drafting and analyzing legal documents; collecting, compiling, and utilizing technical information to make an independent decision and recommendation to the supervising attorney.

I further attest that applicant's ethical and professional conduct is above reproach, and that I would recommend applicant for membership in VCPA.

Dated: _____

 Signature of Attorney

****TO BE COMPLETED BY APPLICANTS
FOR STUDENT MEMBERSHIP**

Current school _____

Address _____

Courses enrolled in _____

Expected completion date _____

Either attach proof of enrollment or obtain the signature of your instructor:

Dated: _____

 Instructor's Signature

Annual dues for active and associate member are \$40; student membership is \$30; and sustaining membership is \$125. Please mail your completed application and check to VCPA, P.O. Box 24229, Ventura, CA 93002, Attn. 2nd Vice-President/Membership. If you have questions, please write to us at this address or visit the VCPA website at: www.vcparalegal.org.