



PARALEGAL ASSOCIATION OF FLORIDA, INC.

An affiliate of the National Association of Legal Assistants, Inc.

466 94th Avenue North, St. Petersburg, FL 33702 • p: (727) 258-0460 • www.pafinc.org

APPLICATION FOR NEW MEMBERSHIP – ASSOCIATE MEMBER

Definitions and Qualifications of Paralegal (also known as Legal Assistant)

Paralegals are a distinguishable group of persons who assist attorneys in the delivery of legal services. Through formal education, training, and experience, paralegals/legal assistants have knowledge and expertise regarding the legal system and substantive and procedural law, which qualify them to do work of a legal nature *under the supervision of an attorney*.

“Legal Assistant” means a person, “*who under the supervision and direction of a licensed attorney*,” engages in legal research and case development or planning in relation to modifications or initial proceedings, services, processes, or applications; or who prepares or interprets legal documents or selects, compiles, and uses technical information from references such as digests, encyclopedias or practice manuals and analyzes and follows procedural problems that involve independent decisions.” (Fla. Stat. ch. 57.104) The terms “Legal Assistant” and “Paralegal” are utilized interchangeably and such professional positions are not intended to be misunderstood as two separate professions.

ASSOCIATE MEMBERSHIP

NAME: _____ E-MAIL: _____

HOME MAILING ADDRESS: _____ COUNTY: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

EMPLOYER’S NAME: _____

EMPLOYER’S ADDRESS: _____ COUNTY: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

EMPLOYER’S FAX NO. _____ (OPTIONAL); BIRTH MONTH: _____ BIRTH DAY: _____

NOTE: E-MAIL IS PAF’S PREFERRED COMMUNICATION, BUT IF A MAILING IS BEING SENT, PLEASE SEND TO MY: HOME: _____ OFFICE: _____

NALA MEMBER? YES: _____ NO: _____

IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT, DO YOU HAVE ANY SPECIAL NEEDS? YES: _____ NO: _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES*: _____ NO: _____

*In accordance with Articles 3.9 and 3.27 of the NALA Bylaws, by which PAF is also governed, individuals who have been convicted of a felony are not eligible for membership.

I hereby apply for membership as an ASSOCIATE MEMBER in the PARALEGAL ASSOCIATION OF FLORIDA, INC (“PAF”) and certify that the above information is true and correct and that I meet one of the requirements for membership as an Associate Member as set forth at PAF’s website (www.pafinc.org). I affirm that I have read and agree to be bound by the Code of Ethics and Professional Responsibility adopted by the National Association of Legal Assistants, Inc. and the PARALEGAL ASSOCIATION OF FLORIDA, INC. (See PAF website: www.pafinc.org). If I am advised by PAF that I have been found to be in violation of Section 3.8 of its Bylaws, I will, on my own initiative, resign my membership from PAF.

PLEASE CHECK APPROPRIATE ASSOCIATE CATEGORY FOR WHICH YOU ARE APPLYING AND PROVIDE SUPPORTING DOCUMENTATION
Failure to provide your check and required supporting documentation will delay the approval of application.

- (A) Attorney. (Florida Bar Number: _____.)
- (B) Educator. (Provide evidence of same.)
- (C) Any person having attained the age of 55 years, who formerly would have been eligible for membership because of profession or otherwise. (Provide evidence of same.)
- (D) Non-resident of the State of Florida who would otherwise qualify for membership.
- (E) Individuals who have graduated or completed a paralegal program but who have not been employed full-time as a paralegal for at least 6 months. (Provide copy of certificate or degree showing proof of graduation date.)

SIGNATURE: _____ DATE: _____

Make check payable to: "PARALEGAL ASSOCIATION OF FLORIDA, INC."

MEMBERSHIP CYCLES ARE JULY 1 – JUNE 30 OF EACH YEAR. REGARDLESS OF DATE OF APPROVAL, MEMBERSHIP WILL EXPIRE AND BE UP FOR RENEWAL ON JUNE 30

ASSOCIATE: \$90.00 (\$45.00 PRORATED FOR APPLICATIONS RECEIVED JANUARY 1 THROUGH JUNE 30)

CHANGE OF MEMBERSHIP STATUS: When the eligibility requirements for Active membership are met, an Associate member may request a change of status from "Associate" to "Active" Membership upon completion of an Application for New Membership, accompanied by supporting documentation, active member dues, and the applicable initiation fee.

In the event an application has been pending for a period of 90 days or more due to a deficiency of which the applicant has been informed, and the deficiency remains unsatisfied, PARALEGAL ASSOCIATION OF FLORIDA, INC. will impose a 50% processing fee upon return of the application. APPROVED APPLICANTS WILL BE NOTIFIED VIA E-MAIL.

MEMBERSHIP FEE INCLUDES MEMBERSHIP IN A PAF CHAPTER

I REQUEST THAT I BE PLACED IN THE FOLLOWING PAF CHAPTER (If you are unfamiliar with the Chapter Locations, visit the PAF website at www.pafinc.org):

<input type="checkbox"/> BIG BEND	<input type="checkbox"/> BOCA RATON	<input type="checkbox"/> BREVARD	<input type="checkbox"/> BROWARD
<input type="checkbox"/> FIRST COAST	<input type="checkbox"/> HILLSBOROUGH	<input type="checkbox"/> PALM BEACH	<input type="checkbox"/> PINELLAS
<input type="checkbox"/> SOUTHWEST FLORIDA	<input type="checkbox"/> SUNCOAST	<input type="checkbox"/> TREASURE COAST	

The name of the PAF Chapter and contact information will be provided in the approval notification. If an applicant does not indicate a PAF Chapter affiliation, a Chapter affiliation will be designated based on the applicant's geographic location closest to their home address. Members at Large will be designated only for those applicants whose home address is not located near a PAF Chapter.