

Oklahoma Paralegal Association Membership Application

| Fiscal Yea | ir: January 1 to December 31 | |
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| NEW N | IEMBERRENEWAL | L |
| Please complete the information requested and dues check payable to the Oklahoma Paralegal | | |
| Active (\$50.00 per year) St Associate (\$45.00 per year) Co See Bylaws or OPA's website for special require Retired He | | |
| NAME OF APPLICANT: (Ms Mrs Mr) | (PLEASE PRINT) | |
| Check as applicable: CP/CLA CLAS ACP _ | or Other: [If ACP or CLA | S, state specialty area] |
| RESIDENCE or HOME MAILING ADDRESS: | | COUNTY: |
| Address: | , City, St | tate Zip |
| Cell Phone: () | , Home Phone () | |
| Home Email: | _, Work Email: | |
| Preferred mailing: Office/Work Home (| Γhis also determines membershi | ip region.) Birthday: Mon Day |
| EMPLOYER INFORMATION: (IF APPLICABLE) Employer: Address: | | COUNTY: |
| City, State | Zip | |
| Phone #: () | Email: | |
| (Pa | ralegal Employer/Supervisor | OBA Member) (Educator)) (Court Reporter) Corporation) (Other) |
| COMMITTEE(S) YOU VOLUNTEER TO SERVE Committee List: Bylaws; Seminar; Membership | | ublic Relations; Student Committee |
| I hereby apply for membership in the Oklahoma of my annual dues as indicated above. I unders my consent to OPA to investigate my application clarification of my qualifications for membership Code of Ethics and Professional Responsibility Procedures established by OPA. | tand that my application is su n and contact my present or f . I further attest that I have re | ubject to approval by OPA. Also, I give former employer(s) for verification or ead and agree to be bound by the |
| Dated: Signature: | | |
| If you have any question please contact OPA via email a | | |
| This serv | es as a Renewal Notice. | [Rev. 12/2021] |



Oklahoma Paralegal Association Membership Classifications & Other Info

Fiscal Year: January 1 to December 31

DUES STRUCTURE

Active Members. Annual dues are \$50.00 per fiscal year (Jan 1 to Dec 31).

Pro-rated dues as follows: After Jun 1 - \$25.00.

Associate Members. Annual dues are \$45.00 per fiscal year.

Pro-rated dues as follows: After Jun 1 - \$22.50.

Student (\$25.00 per year; waived 2022- separate Student Attestation required)

Sustaining Members. Annual dues are \$100.00 per fiscal year.

Pro-rated dues are not offered to sustaining members.

Retiring Members. (*Special requirements; see Bylaws or website.)

Honorary Life Members. (*Special requirements; see Bylaws or website.)

Dues payment should be made via Eventbrite or by mailing your check to OPA, c/o Mona Jenkins, Vice President, 17057 S. 9th West Ave., Glenpool, OK 74033. Make Checks Payable to: OKLAHOMA PARALEGAL ASSOCIATION.

Membership Classifications Descriptions

1. ACTIVE MEMBER. An individual who meets at least one of the following requirements is eligible for active members are the only OPA members who may some as OPA officient directors or consmittee obsine requirements.

| Membership Classifications Descriptions | |
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| 1. ACTIVE MEMBER. An individual who meets at least one of the following requirements is eligible for active membership. Active members are the only OPA members who may serve as OPA officers, directors, or committee chairpersons Please check the category or categories that qualify you for active membership: (a) Successful completion of an institutionally accredited legal assistant program PLUS at least one year's experience as a legal assistant/paralegal; or (b) A minimum of five years' experience as a legal assistant/paralegal; or (c) A bachelor's or higher degree in any field PLUS at least one year's experience as a legal assistant/paralegal; or (d) Successful completion of the voluntary certification examination given by NALA, PLUS current employment as a legal assistant/paralegal, or provide proof of certification and proof or completion of 10 hours of continuing legal education in the year prior to submitting the membership application. | |
| 2. ASSOCIATE MEMBER. An individual who meets at least one of the following requirements is eligible for associate membership. Associate members may participate on committees and receive the same benefits as active members, except for voting privileges and eligibility to serve as officers, directors or committee chairpersons. Please check the category or categories that qualify you for associate membership: (a) Successful completion of an institutionally accredited legal assistant/paralegal program with less than one year's experience as a legal assistant/paralegal; or (b) One year's experience, but less than five years's experience, as a legal assistant/paralegal; or (c) A bachelor's or higher degree in any field, with less than one year's experience as a legal assistant/paralegal; or (d) Successful completion of the voluntary certification examination given by NALA, but not currently employed as a legal assistant/paralegal. | |
| 3. STUDENT MEMBER. An individual who is an actively enrolled student in an institutionally accredit legal assistant/paralegal program. Student members may participate on committees and receive the same benefits as active members except for voting privileges and eligibility to serve as officers, directors or committee chairpersons, except as chairperson of student committee. (NOTE: Any applicant who qualifies as a student member and as an active member or associate member may choose the preferred classification.) | |
| 4. SUSTAINING MEMBER. One or more of the following who endorse the legal assistant/paralegal concept or who are involved in the promotion of the legal assistant/paralegal profession; members of the Oklahoma Bar Association; law firms corporations; legal assistant/paralegal educators; persons directly involved in the employment and/or supervision of legal assistants/paralegals; and other members of the legal community, including, without limitation, law office administrators and cour reporters. Sustaining members receive the same benefits as active members, except for voting privileges and eligibility to serve as officers, directors, or committee chairpersons. | |
| 5. RETIRED MEMBER. An Active Member in good standing who reaches the age 62, or has retired due to physica | |

_______5. RETIRED MEMBER. An Active Member in good standing who reaches the age 62, or has retired due to physical disability, who has a total of five consecutive years of OPA membership and is no longer working as a legal assistant/paralegal may request Retired Member classification. Retired Members will be relieved from paying membership dues. Members who were previously classified as Active Members may change their classification to Retired Member by submitting a written request to the OPA Board with a statement that he/she has retired from an active career as a legal assistant/paralegal or is no longer employed as a

| legal assistant/paralegal. Retired Members shall be voting members who may serve on an OPA committee but shall not be officers of the Association. The retired membership is renewed annually. 6. HONORARY LIFE MEMBER. Honorary Life Members include all past presidents of the Association and active OPA members who have retained their membership for at least 20 years, who shall retain all membership rights of an individual member and shall be voting members with the right to hold elective office. 7. EMERITUS MEMBER. Emeritus Membership is open to any individual, upon nomination by an OPA director and by approval of not less than 2/3 of the members present at a regular meeting, who has met all the following qualifications: (a) has rendered distinguished service to OPA over a substantial time period, (b) has made significant contributions to the advancement of OPA's mission and the paralegal profession, (c) has been a member of OPA in good standing for more than ten years, and (d) has retired from an active career as a paralegal. Once elected, emeritus members automatically retain emeritus status for life, with no requirement for membership renewal or dues payment, unless such emeritus member returns to active-member status by application. | | | |
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| | | | COMMITTEE SERVICE: Leadership and volunteer service of members are welcomed! See below list of the OPA committees. While serving on a committee is not mandatory, it is the best way to meet other OPA members who share your same interests— and it is fun! OBA Liaison Committee Budget and Finance Committee Bylaws and Standing Rules Committee Student Committee / Board Liaison – Student Director Long Range Planning / Professional Development Committee Nominations and Elections / Credentials Committee Membership / Roster Committee Public Relations Committee Seminar Committee |
| | | | If you have any questions or changes in your membership status, please contact OPA via email at OklahomaParalegalAssociation@gmail.com. |
| [Rev. 12/2021] | | | |



Oklahoma Paralegal Association Student Membership Attestation with Verification

Fiscal Year: January 1 to December 31

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| DUES STRUCTURE Student (\$25.00 per year; waived 2022) |
| Student Applicant's Name: |
| STUDENT ATTESTATION |
| I hereby apply for membership in OPA and submitted \$25 or dues waived in payment of the annual dues. I hereby consent to OPA's investigation of my application and to OPA's contacting my present school for verification or clarification of my qualifications for student membership. I attest that I am 18 years of age or older, a resident of the State of Oklahoma and that I am actively enrolled in a paralegal/legal assistant program at (name of school) and, as such, qualify as a student member. I further attest that I have read and agree to be bound by the Code of Ethics and Professional |
| Responsibility of OPA and NALA, and I agree to be bound by the Disciplinary Procedures established by OPA. |
| I UNDERSTAND THAT MY QUALIFICATION FOR MEMBERSHIP DEPENDS ON THE RETURN OF THE SIGNED VERIFICATION FORM TO OPA. THEREFORE, I HAVE SIGNED BELOW AND WILL DELIVER THE COORDINATOR'S VERIFICATION FORM TO THE PROGRAM COORDINATOR OR DIRECTOR AT THE SCHOOL/INSTITUTION NAMED ABOVE. |
| TO PARALEGAL PROGRAM DIRECTOR/COORDINATOR: |
| I have applied for membership in the Oklahoma Paralegal Association as a student member. To qualify as a Student Member, I must provide verification from the coordinator of the paralegal/legal assistant program at the college or university where I am enrolled. Please verify that I am actively enrolled in the Paralegal/Legal Assistant Program at the school or institution named above by signing the Coordinator's Verification below and mailing this form to: Oklahoma Paralegal Association, c/o Mona Jenkins, OPA Vice President, 17057 S. 9 th West Ave., Glenpool, OK 74033. You have my permission to furnish additional information or clarification as requested by the Oklahoma Paralegal Association in verifying my active enrollment. |
| Date Student's Signature |
| COORDINATOR'S VERIFICATION |
| This will serve as verification by the undersigned that (a) I am the Coordinator or Director of the Paralegal/Legal Assistant Program at the; and (b) that the student named above is actively enrolled in the program of which I am the coordinator or director. I recommend the applicant for student membership in the Oklahoma Paralegal Association. |
| Date: |
| Signature: |
| Signature: Print Name/Title: |
| If you have any questions or changes in your membership status, |

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[Rev. 12/2021]