

**RHODE ISLAND PARALEGAL ASSOCIATION**

**MEMBERSHIP APPLICATION**

RIPA Membership Year is from July 1st through June 30th

Send your Application and Check payable to RIPA to:

RIPA, P.O. Box 1003, Providence, RI 02901

[WWW.RIPARALEGALS.ORG](http://WWW.RIPARALEGALS.ORG)

Check one: **NEW:** \_\_\_\_\_ **RENEWAL:** \_\_\_\_\_

<b>Name:</b>	
<b>Home Address:</b>	
<b>Employer:</b>	
<b>Office Address:</b>	
<b>Job Title/Practice:</b>	
<b>Preferred Email:</b>	
<b>Preferred Phone:</b>	

**CHECK MEMBERSHIP CATEGORY: \$ \_\_\_\_\_ Dues Enclosed**

**Voting Member: (\$60.00) Please check which category below applies to you:**

- \_\_\_\_\_ Bachelor's Degree in Paralegal Studies plus one year minimum employment as a paralegal;
- \_\_\_\_\_ Bachelor's Degree in any subject plus two years minimum employment as a paralegal;
- \_\_\_\_\_ Associate's Degree in Paralegal Studies plus two years minimum employment as a paralegal;
- \_\_\_\_\_ Certificate in Paralegal Studies plus two years minimum employment as a paralegal; or
- \_\_\_\_\_ Five or more years of employment as a paralegal (degree not a prerequisite)

**Non-Voting Member: (\$50.00) Please check which category below applies to you:**

- \_\_\_\_\_ Bachelor's Degree in Paralegal Studies, but less than one year employment as a paralegal;
- \_\_\_\_\_ Bachelor's Degree in any subject but less than two years minimum employment as a paralegal;
- \_\_\_\_\_ Associate's Degree in Paralegal Studies, but less than two years employment as a paralegal;
- \_\_\_\_\_ Certificate in Paralegal Studies, but less than two years employment as a paralegal; or
- \_\_\_\_\_ Less than five years employment as a paralegal (degree not a prerequisite).

\_\_\_\_\_ **Student Member: (\$40.00)** — Must either be a student currently enrolled in a program leading to a Bachelor's Degree, an Associate's Degree or a Certificate in Paralegal Studies or is a recent graduate who does not qualify as a voting, non-voting or a sustaining member.

\_\_\_\_\_ **Sustaining Member: (\$100.00)** — Corporations, law firms, colleges/universities.

**Membership in RIPA includes membership In the National Federation of Paralegal Associations (NFPA).**

- Have you ever been convicted of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please attach a statement of explanation.
- Check here if you do NOT want your name on a mailing list which the RIPA Board or NFPA may make available to vendors of legal related products/services: \_\_\_\_\_
- Check here if you do NOT want your name included in the membership directory on RIPA's website [RIPARALEGALS.ORG](http://RIPARALEGALS.ORG): \_\_\_\_\_
- I would like to volunteer on the following committee(s):

\_\_\_\_\_ Publications \_\_\_\_\_ Education \_\_\_\_\_ Job Bank \_\_\_\_\_ Membership \_\_\_\_\_ Programs  
\_\_\_\_\_ Policy & Issues \_\_\_\_\_ Pro Bono \_\_\_\_\_ Public Relations

I understand that this application does not constitute automatic membership In the RIPA, I am aware that this application will be reviewed by the Membership Committee and the Board of Directors. I hereby certify that the information provided In this application is true and that I meet the RIPA's requirements for membership. I agree to notify the RIPA of any change of address or change in my status that would affect the category of membership applied for on this application.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_