Application for Membership in NALS...the association for legal professionals

Date:	DETERMINATION OF AMOUNT TO PAY NALS is a tri-level association. Please choose one in each of the categories below to						
Name:	dete	rmine the	amount to	pay. Payment	must be incl	uded with application.	
Email:	1.	NALS Member Dues (choose one)					
Address:			\$130	Member	,		
City/State/Zip:			\$ 75 \$ 29	Student Me		ucators, judges, attorneys)	
County:	2.	Texas	ДΙРΜ	ember Dues	s (choose	one)	
Preferred Mailing Address: ☐ Home ☐ Business			\$15	Member	-	·	
Position Title			\$15 \$ 5	Member-at- Student Me		re no chapter is available)	
Employer:	3.	l ocal	Chanta	r Member D	lues (cho	nea ona)	
Business Address:	J.		\$15	Austin LPA,	Inc.	ose one,	
City/State/Zip:			\$ 9 \$25				
Business Phone:			\$ 7 \$15	El Paso Co Houston AL			
Business Fax:			\$10	Lubbock LP	PΑ		
Home Address:			\$10 \$10	Midland ALI NALS of An			
City/State/Zip:			\$10 \$10	San Antonio Waco LPA	LSA		
Home Phone:			\$25	Wichita Cou	ınty LSA		
Home Fax:	NAL	_S Memb	er Dues			\$	
Birthday (Month/Day)		TALP Member Dues Local Chapter Member Dues				\$	
Discourse in the following information:		TAL DUE		oci Ducs		\$	
Please provide the following information:						Ψ	
Your specialty (check one)	Pay	ment M	lethod:	Payment m	ust accomp	any application	
□ Law Office Management□ Probate/Estate Planning□ Administrative	Mak	ke chec	checks payable to: NALS				
☐ Criminal ☐ Bankruptcy ☐ Taxation ☐ Litigation	Che	ck One:	□ Ch	eck/Money O	rder	□ VISA	
□ Real Estate □ Family				asterCard		☐ Discover	
☐ General ☐ Other		ne of Car					
Age □ Under 25 □ 25-35 □ 36-45 □ 46-55 □ Over 55		Credit Card Number:Expiration Date:					
		dit Card S		:			
Years Worked in Legal Profession □ 0-1 □ 2-5 □ 6-10 □ 11-15 □ 16-19 □ Over 20	Ву	submit	ting and	d signing t	his applic	cation, you certify that you	
						e bound by the NALS Code	
Number of Lawyers in Office □ 0 □ 1-5 □ 6-10 □ 11-20 □ 21-49 □ Over 50	OI E	unics.	wembei	rship is not	transierra	able.	
Type of Logal Office	Sig	nature:					
Type of Legal Office □ Law Office □ Government Service		Return	this form	n and payment		LS Resource Center	
☐ Court System ☐ Self-employed ☐ Corporate Legal Department ☐ Other		If a cre	edit card i	is used, pleas		59 East 41 st Street sa, Oklahoma 74145	
		to: 918	-582-5907	7.			
Sponsor Information It is not necessary to have a sponsor to join; however, if a NALS		SEND	COPY	TO:	Rita Ales		
member encouraged you to join, please provide that member's name and other information requested if you know it.					301 25th		
						n, TX 77539 nbership@talp.org	
Sponsor Name:							
Sponsor's Member Number: Chapter Affiliation:						_ (TALP	
Chapter Affiliation:		A				The state of	



