



American Association for Paralegal Education

19 Mantua Road

Mt. Royal, New Jersey 08061

856-423-2829

Fax: 856-423-3420

INDIVIDUAL MEMBERSHIP APPLICATION

This application is to be completed by educators and administrators who wish to join as individual members and whose institution is already an institutional voting member of the Association or for individuals who have been program educators or administrators within the past 12 months but who are no longer associated with a member institution. This is a non-voting membership category.

Name of Applicant

Name of Organization/Company

Address

City/State/Zip Code

Area Code/Telephone Number

Fax Number

E-Mail Address

Relationship to Paralegal Education Program (e.g., advisor, faculty)

Name of Institution (Institution must already be an Institutional member of AAfPE in good standing)

Date

Signature of Applicant

DUES PAYMENT - Please submit this application with your dues payment. Refer to dues rate card or visit the website at www.aafpe.org for current rates.

Form of Payment: Check Visa MasterCard AMEX Purchase Order

Credit Card # _____ Expiration Date: _____

Full Name on Card: _____

Send to:

**American Association for Paralegal Education
19 Mantua Road
Mt. Royal, NJ 08061**

*Contributions or gifts to the Association are not deductible as charitable contributions for Federal income tax purposes.
Dues payments are deductible by members as an ordinary and necessary business expense.*