## THE FAMILY LAW PARALEGALS OF PENNSYLVANIA APPLICATION FOR MEMBERSHIP OR RENEWAL

Membership Chairperson: Jennifer Echikson Email: jenn@mflpa.com

To be considered for membership, applicants shall be presently employed as a paralegal, with current duties, past experience and/or interests inclusive of work in Pennsylvania family law practice.

2024 Membership Fee: \$50.00

Please send the completed application with check or money order for your membership fee made payable to Family Law Paralegals of Pennsylvania to:

Family Law Paralegals of Pennsylvania Attn: Jenn Echikson, Membership Chair Materese Family Law, PC 580 Virginia Dr., Suite 225 Fort Washington, PA 19034

Name:		
Check one:	☐ Membership Rene	ewal
Please list the PA counties in which you practice: _		
Employer:		
Business Address:		
Business Telephone:		
Business Email:		
Personal Address:		
Personal Telephone:		
Personal Email:		
*Please indicate which email address to send in	oformation: work	home

Current employment status:	full time	part time	freelance	
Years' experience as a paralegal: in Family Law:				
Highest degree attained:				
Paralegal certificate/degree from	ı (if applicable	e):		
Credentials: Pa.C.P	Other (plea	ase specify):		
Have you ever been convicted o	f a felony?	□ Yes	□ No	
New members: how did you hea	r about us? _			
I agree to notify the association	of any change	e to my address a	and contact information.	
Date: Applicant's	Signature			
DUES	ARE TO BE	PAID ANNUALLY	Y	
FOR ASSOCIATION USE ONLY	/	_		
Payment received:	Amount	·	Check No	
Membership Approval Date:				