



Post Office Box 2840
Tampa, Florida 33601
Email: Tampabay@paralegals.org
Website: www.tbpa.org

MEMBERSHIP ANNUAL RENEWAL (January 1 – December 31)

ACTIVE MEMBERSHIP RENEWAL	Dues: \$95.00
STUDENT MEMBERSHIP RENEWAL	Dues: \$35.00*
ASSOCIATE MEMBERSHIP RENEWAL	Dues: \$95.00
SUSTAINING MEMBERSHIP RENEWAL	Dues: \$125.00
EMERITUS MEMBERSHIP RENEWAL	Dues: \$50.00
HONORARY MEMBERSHIP RENEWAL	Dues: No Dues

MEMBER NAME: _____

STEP 1: During Membership Annual Renewal, the online TBPA Member Profile must be updated with any changes. After you have made any modifications online, please indicate below the changes made. This will help us ensure the specific changes for your automatic membership with NFPA and FAPA (which is part of your TBPA Membership). Note: Home addresses and phone numbers are never published.

Name: _____

Home Address: _____

Home Phone: _____

Employer: _____

Work Address: _____

Work Phone: _____

Preferred Email: _____

Alternative Email: _____

Membership Category: _____

Specialty: _____

STEP 2: If there was a change in employment or membership category (such as changing from Student to Active category), please circle the new membership category above, then read and sign the appropriate attestation for your membership category located on the next page. Please refer to the membership category descriptions listed on our website if you need details. If membership category has changed, a new electronic invoice will be generated for payment of the new dues as listed above.

STEP 3: Return all pages (if attestation is required) to the P.O. Box referenced above or scan/email it to membership@tbpa.org. **Renewals must be completed on or before January 1st of each year.**

***If Student Member, please send current proof of enrollment.**

ACTIVE MEMBER ATTESTATION

I hereby affirm that I have not been convicted of a felony, that I am not a disbarred or suspended attorney and that I have not been found to have engaged in the unauthorized practice of law. Further I understand that once approved as a member of the TBPA, I am subject to all of the provisions contained in the NFPA Code of Ethics and Professional Responsibility. Further, I hereby affirm that I am eligible to apply for active membership consistent with the eligibility requirements as set forth and outlined by the Bylaws and Standing Rules of TBPA in that I am a resident of either Hillsborough, Pinellas, Polk, Pasco, Hernando, Manatee or Sarasota County, and that I am currently employed by the law firm, attorney or corporation listed on the previous page. I hereby acknowledge that the information contained on this Renewal for Membership to the TBPA is true and accurate to the best of my knowledge.

Date: _____ Signature: _____

STUDENT MEMBERSHIP ATTESTATION

I hereby affirm that I have not been convicted of a felony, that I am not a disbarred or suspended attorney and that I have not been found to have engaged in the unauthorized practice of law. Further, I understand that once approved as a member of the TBPA, I am subject to all of the provisions contained in the NFPA Code of Ethics and Professional Responsibility. Further, I hereby affirm that I am eligible to apply for Student Membership consistent with the eligibility requirements as set forth as set forth and outlined by the Bylaws and Standing Rules of TBPA. I hereby acknowledge that the information contained on this Renewal for Membership to the TBPA is true and accurate to the best of my knowledge.

Date: _____ Signature: _____

***Note: Students must provide proof of enrollment with Renewal Form.** Student membership is not open to any individual who has successfully completed the Paralegal Advanced Competency Examination (“PACE”) of the National Federation of Paralegal Associations, Inc. or the Certified Legal Assistant (“CLA”) examination of the National Association of Legal Assistants, Inc. (See “Active” or “Associate” Membership.)

ASSOCIATE MEMBERSHIP ATTESTATION

I hereby affirm that I have not been convicted of a felony, that I am not a disbarred or suspended attorney and that I have not been found to have engaged in the unauthorized practice of law. Further, I understand that once approved as a member of the TBPA, I am subject to all of the provisions contained in the NFPA Code of Ethics and Professional Responsibility. Further, I hereby affirm that I am eligible to apply for Associate Membership consistent with the eligibility requirements as set forth as set forth and outlined by the Bylaws and Standing Rules of TBPA. I hereby acknowledge that the information contained on this Renewal for Membership to the TBPA is true and accurate to the best of my knowledge.

Date: _____ Signature: _____

SUSTAINING MEMBERSHIP ATTESTATION

I hereby affirm that I have not been convicted of a felony, that I am not a disbarred or suspended attorney and that I have not been found to have engaged in the unauthorized practice of law. Further, I understand that once approved as a member of the TBPA, I am subject to all of the provisions contained in the NFPA Code of Ethics and Professional Responsibility. Further, I hereby affirm that I am eligible to apply for Sustaining Membership consistent with the eligibility requirements as set forth as set forth and outlined by the Bylaws and Standing Rules of TBPA. I hereby acknowledge that the information contained on this Renewal for Membership to the TBPA is true and accurate to the best of my knowledge.

Date: _____ Signature: _____