

Membership Application Paralegals and Office Administrators

Lancaster Bar Association 28 East Orange Street, Lancaster, PA 17603 717-393-0737 | lancasterbar.org

Please fill out the application below. Mail or email to: Kelly D. Bell, Membership Coordinator

Email: kelly@lancasterbar.org

Full Name:				
Today's Date:				
PROFESSIONAL INFORMAT	ION			
Firm Name:				
Firm Address:				
Phone:	E-mail address:			
Would you like your professional cont	your role within your firm? [] Paralegal or [] Office Administrator act information, including your email address, to go out in the next LBA			
newsletter? [] Yes or [] No				
Are you presently a Lancaster Area Paralegal Association (LAPA) member? [] Yes or [] No				
ADDITIONAL INFORMATIO	N			
Home Address:				
Cell:	Personal E-mail address:			
College/University:	Year of Graduation:			



Membership Application (continued)

Indicate your interest in the following categories by checking as many as apply.

You will be sent email notices when these groups meet.

SECTIONS		DIV
[] Child Dependency Law		[] Pa
[] Civil Litigation (Trial Law)		[] Yo
[] Corporate Business & Bankruptcy Law		
[] Criminal Law		
[] Elder Law		
[] Employment & Labor Law		
[] Estate Planning & Probate Law		
[] Family Law		
[] In-House Counsel		
[] Municipal, Zoning & Environmental Law		
[] Professionalism/Ethics		
[] Real Estate Law		
[] Workers' Compensation and Administrative Law		
COMMITTEES		
[] Community Relations	_	
[] Public Service		
[] Social		