



OMAHA LEGAL PROFESSIONALS ASSOCIATION

Membership Application/Renewal

2009-2010 Fiscal Year (April 1, 2009 through March 31, 2010)



NAME: _____ BIRTH DATE (month/day): _____

ADDRESS: _____

CITY & STATE: _____ ZIP: _____

HOME PHONE: _____ WORK PHONE: _____

HOME FAX: _____ WORK FAX: _____

HOME E-MAIL: _____ WORK E-MAIL: _____

PLACE OF EMPLOYMENT: _____

ADDRESS: _____

CITY & STATE: _____ ZIP: _____

OCCUPATION: _____

AREAS OF LAW: _____

Please indicate preferred mailing address for notices and publications by checking one of the spaces below. If there is a change in your work or home address, please notify the Treasurer. HOME: _____ WORK: _____

AREAS OF INTEREST: PLEASE INDICATE ALL COMMITTEES IN WHICH YOU HAVE AN INTEREST

- | | | |
|---|--|--|
| <input type="checkbox"/> Bar Liaison/Law Day | <input type="checkbox"/> Nominations and Elections | <input type="checkbox"/> Roster |
| <input type="checkbox"/> Community Service | <input type="checkbox"/> Program/Public Relations | <input type="checkbox"/> Scholarship |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Publications | <input type="checkbox"/> Social Activities |
| <input type="checkbox"/> Historian | <input type="checkbox"/> Reservations | <input type="checkbox"/> Ways and Means |
| <input type="checkbox"/> Legal Education/Seminars | | |

It is the responsibility of all officers and committee chairpersons to attend all general membership meetings and Board of Director meetings of the Association. General membership meetings are held the Third Wednesday of the month (except July, August and December) and Board of Director meetings are held the first Wednesday of the month (except July and December).

MEMBERSHIP CATEGORIES AND DUES AMOUNT

Mail checks payable to OLPA to the attention of the Treasurer at the address below by April 1, 2009. If you have any questions, please call the Treasurer at the number listed below.

- _____ MEMBERSHIP – DUES ARE \$50 (\$25 each for local chapter and state association - includes membership pins)
 Please indicate if you want membership pins (includes both local and state): Yes _____ No _____
- _____ STUDENT MEMBERSHIP – DUES ARE \$15 (\$15 for local chapter; no dues for state association)
- _____ HONORARY MEMBERSHIP – GRATIS (for local chapter and state association)

ATTESTATION FOR STUDENT MEMBERSHIP

I hereby attest that _____ is currently enrolled for _____ credit hours per semester at the following school: _____.

Dated: _____ By: _____
Name: _____
Title: _____

PLEASE MAIL APPLICATIONS TO THE TREASURER AT THE FOLLOWING ADDRESS:

Sheila Benson For questions call: Sheila Benson (402) 697-1058
 OLPA Treasurer or e-mail at BENSON820@aol.com
 15423 Farnam Circle
 Omaha NE 68154