ORANGE COUNTY BAR ASSOCIATION
P.O. BOX 88 GOSHEN, NEW YORK 10924
(845) 294-8222

Email: ocbany@gmail.com Website: www.orangecountybarassociation.org

"PARALEGAL" MEMBERSHIP APPLICATION/INVOICE

- **Please complete this form and return it with your check to the address above.**

Name: _____

E-MAIL ADDRESS: _____
Failure to provide your complete current e-mail address may interfere with your access to the OCBA list serve

Business Address:_____

City: _____State:_____ Zip Code:_____

Day Telephone #_____ Cell #: _____

Home Address:___ _____

City: _____State:_____ Zip Code:_____

Paralegal Studies Degree_____ Date:_____

Other Degrees:_____ Date:_____

Yearly Dues (Renew on January 1st each year).....$50.00

Affirmation of Admission:

The undersigned attorney affirms that I am presently practicing paralegal law in the State of New York and I remain in good standing:

_____
Signature