



APPLICATION FOR MEMBERSHIP IN LEGAL ASSOCIATION

Please complete and deliver this application, with check payable to _____ for \$ _____, which includes local dues, any initiation fee, and Legal Secretaries, Incorporated (LSI)* per capita tax to:

Name of Applicant: _____
Type of Membership: Active (Directly engaged in work of a legal nature in California): _____
Student (Enrolled in a course of study leading to employment in the legal profession): _____
Associate (Actively seeking employment in the legal profession): _____

Employer: _____ Position: _____

Name of school you are attending if you are applying for Student Membership: _____

USE THIS ADDRESS FOR MAILINGS:

Business Address: _____

City: _____, California Zip: _____

Business Telephone: _____

Business Facsimile: _____

Business E-Mail: _____

USE THIS EMAIL ADDRESS FOR ALL COMMUNICATIONS.

USE THIS ADDRESS FOR MAILINGS:

Home Address: _____

City: _____, State: _____ Zip: _____

Residence Telephone: _____

Mobile Telephone: _____

Home E-Mail: _____

USE THIS EMAIL ADDRESS FOR ALL COMMUNICATIONS.

For receipt of The Legal Secretary magazine, please indicate receipt electronically or by hard copy:

- Send me The Legal Secretary magazine electronically to my home email address OR my business email address (check one)
Send me a hard copy of The Legal Secretary magazine to my home address OR my business address (check one)

Employment in the legal field (please include positions, dates): _____

Previous membership in a legal secretaries/professionals association (please include associations, dates): _____

IF ACCEPTED AS A MEMBER, I AGREE TO BE BOUND BY THE BYLAWS AND STANDING RULES OF LEGAL SECRETARIES, INCORPORATED, AND THE LOCAL ASSOCIATION TO WHICH I HEREBY APPLY FOR MEMBERSHIP, INCLUDING THE FOLLOWING CODE OF ETHICS:

IT SHALL BE THE DUTY OF EACH MEMBER OF LEGAL SECRETARIES, INCORPORATED TO OBSERVE ALL LAWS, RULES AND REGULATIONS NOW OR HEREAFTER IN EFFECT RELATING TO CONFIDENTIALITY AND PRIVILEGED COMMUNICATION, ACTING WITH LOYALTY, INTEGRITY, COMPETENCE AND DIPLOMACY, IN ACCORDANCE WITH THE HIGHEST STANDARDS OF PROFESSIONAL CONDUCT.

(Dedicated to the memory of Joan M. Moore, PLS, CCLS, LSI President 1980-82)

SIGNATURE OF APPLICANT: _____ DATE: _____

SPONSOR: _____ APPLICATION APPROVED: _____

*Accompanying membership in Legal Secretaries, Incorporated (LSI), a California non-profit mutual benefit association, includes a subscription to THE LEGAL SECRETARY magazine, reduced annual dues for membership in Legal Specialization Sections and discounted prices on purchase of LSI LEGAL PROFESSIONAL'S HANDBOOK and LAW OFFICE PROCEDURES MANUAL.



LSI LEGAL SPECIALIZATION SECTIONS MEMBERSHIP

LSI MEMBERS MAY ALSO JOIN ONE OR MORE OF THE FOLLOWING LSI LEGAL SPECIALIZATION SECTIONS FOR *REASONABLE ANNUAL DUES LISTED BELOW:

- CIVIL LITIGATION
- CRIMINAL / FAMILY LAW
- FEDERAL LAW
- LAW OFFICE ADMINISTRATION
- PROBATE/ESTATE PLANNING
- TRANSACTIONAL LAW

Legal Specialization Sections provide access to continuing education workshops and seminars. Membership includes access to free quarterly workshops; quarterly newsletters containing up-to-date information, including changes in the law and forms; statewide roster of all members in each section for easy access to local procedural information in other counties; and networking opportunities. ***Annual section dues are as follows: \$20 to join each section, or \$75 to join all six sections for LSI members. Dues for non-LSI members are \$40 per section or \$150 to join all six sections.**

For further information regarding LSI's Legal Specialization Sections, please visit LSI's website at www.lsi.org/legal-specialization-sections/.

Please check your area(s) of expertise:

- | | | | |
|----------------------------------------------|------------------------------------------------|----------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Administrative | <input type="checkbox"/> Corporate | <input type="checkbox"/> Legal Malpractice | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Appeals | <input type="checkbox"/> Defense | <input type="checkbox"/> Litigation | <input type="checkbox"/> Securities |
| <input type="checkbox"/> Arbitration | <input type="checkbox"/> Environmental | <input type="checkbox"/> Maritime | <input type="checkbox"/> State |
| <input type="checkbox"/> Bankruptcy | <input type="checkbox"/> Family | <input type="checkbox"/> Medical Malpractice | <input type="checkbox"/> Tax |
| <input type="checkbox"/> Civil Litigation | <input type="checkbox"/> Federal | <input type="checkbox"/> Plaintiff | <input type="checkbox"/> Transactional |
| <input type="checkbox"/> Criminal | <input type="checkbox"/> Intellectual | <input type="checkbox"/> Personal Injury | <input type="checkbox"/> Workers' Compensation |
| <input type="checkbox"/> Construction Defect | <input type="checkbox"/> Law Office Management | <input type="checkbox"/> Probate / Estate Planning | |
- Other (Please) _____

Occupation:

- | | | | |
|------------------------------------------|------------------------------------|-------------------------------------------------------|----------------------------------|
| <input type="checkbox"/> Legal Secretary | <input type="checkbox"/> Paralegal | <input type="checkbox"/> Clerk | <input type="checkbox"/> Student |
| <input type="checkbox"/> Support Staff | <input type="checkbox"/> Attorney | <input type="checkbox"/> Other (Please specify) _____ | |

Years worked in the legal profession:

- | | | | |
|----------------------------------------|----------------------------------------|--------------------------------------|----------------------------------------|
| <input type="checkbox"/> 0 – 6 Months | <input type="checkbox"/> 1 – 4 Years | <input type="checkbox"/> 5 – 9 Years | <input type="checkbox"/> 10 – 15 Years |
| <input type="checkbox"/> Over 15 Years | <input type="checkbox"/> Over 20 Years | | |

Reason(s) for joining our Association?

What benefits and/or goals do you want to achieve with this Association?

What type of participation would you like to have with our Association?

- Are you willing to hold a standing committee job or an assistant chair? Yes No
- Does your employer pay for your membership dues? Yes No
- Does your employer pay for your monthly meetings? Yes No
- Does your employer provide you with benefits? Yes No
- Medical Dental Vision Vacation Holidays Floating Holidays