

National Association of Bond Lawyers

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Print Form.
Return Via Mail

2023 PARALEGAL MEMBERSHIP APPLICATION

_____	_____	_____
Last Name	First Name	Initial

Title		

B. Check as applicable:

- I do not wish to list my e-mail in NABL's Online Directory.
- I do not wish to receive e-mails from NABL.

DEMOGRAPHICS (optional): In an effort to better understand the composition of our membership, NABL requests your responses to the following questions:

Date of Birth _____

Race:

- American Indian or Alaska Native
- Asian
- Black or African American
- Caucasian
- Hispanic or Latino
- Other

Employer Status: Is your law firm/company/employer a minority or woman-owned business?

- Yes
- No

PRIMARY ADDRESS:

Employer Name

Mailing Address

City State Zip Code

Area Code Direct Dial

Area Code Fax Number

Website

Employer email address (print clearly)

Personal email address (print clearly)

HOME ADDRESS

Mailing Address

City State Zip Code

C. Member Referral

D. Dues:

- \$95.00

Signed: _____

Date: _____

- Check Enclosed
- Charge my: AMEX DISC MC VISA

Account Number Expiration Date

- \$ _____ is enclosed as my contribution to The Robert H. Hilderbrand, Jr. Fund. (The Hilderbrand Fund is the Association's 501(c)(3) organization that supports and benefits the educational activities and the Frederic L. Ballard Jr. Memorial Scholarship.)

Dues are not deductible as charitable contributions but may be as a business expense. Contributions to the Hilderbrand Fund are considered charitable contributions.