

THANK YOU FOR JOINING!

Please submit dues, payable to **Cuyamaca Association of Paralegal Students**, and completed form to:
All information will remain confidential

Cuyamaca Association of Paralegal Students
c/o Mary Sessom
900 Rancho San Diego Parkway
El Cajon, CA 92019

Application **New** **Renewal**

Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Number _____

email _____

Are you a Paralegal Studies major? YES NO If yes, units in major _____

Do you have a degree? YES NO If yes, please list _____

Do you have law office, paralegal, or legal secretary experiece? YES NO

Please list agency,
length, and
responsibilities

Do you have any comments,
suggestions, special experience,
skills or knowledge that may be
useful to the Association?

Signed By _____

Date _____