

MEMBERSHIP APPLICATION

Name: Business Name: Address: City, State, Zip Code: _____ Primary Phone: _____ Business Phone: ____ Mobile Phone: _____ Email Address: Website: PLEASE SELECT YOUR MEMBERSHIP LEVEL □ Voting Membership - \$350.00 Subscription period: 1 year, Automatic renewal (recurring payments.) Voting Members are bonded and registered in their county and are compliant with California Mandatory Continuing Legal Education (MCLE) requirements. These members have provided a copy of their valid county registration card and are displayed in the online Member Directory. Email a copy of your registration card to membershipadmin@calda.org Provisional Membership - \$350.00 Subscription period: 1 year, Automatic renewal (recurring payments.) Intended for individuals whose LDA county registration is either pending or lapsed. Allows access to earn MCLE at Voting Member rates, but restricts access to business related resources. Also appropriate for non-LDA's who are registered/ bonded Immigration Consultants, Unlawful Detainer Assistants, or Process Servers. □ Sustaining Membership - \$495.00 Bundle (up to 5 members) Subscription period: 1 year, Automatic renewal (recurring payments.) Sustaining Members are non-LDA business members, supportive of the LDA profession and the Association. □ **Student Membership - \$195.00** Subscription period: 1 year No automatically recurring payments. Student Members will provide evidence of enrollment in a Paralegal Program to the CALDA administrator for membership to be activated. Email transcripts, class schedule, or student ID to membershipadmin@calda.org I agree to abide by CALDA's Code of Ethics and realize that failure to abide by these ethics may provide a basis for removal from membership or ineligibility for renewal of membership. Signature: _____ ☐ Check - Mail to: Membership - CALDA P.O. Box 2582 Granite Bay, CA 95746 □ Credit Card: __ Visa __ MasterCard __ Discover __ American Express Credit Card number: Authorized Amount to be charged to card: _______ CVV: Billing Address: Name of Cardholder: Signature of Cardholder: _____