



## Secondary Membership Application

(FOR MISSOURI LOCAL CHAPTER ASSOCIATIONS)

Your NALS Membership # \_\_\_\_\_

I have a PRIMARY MEMBERSHIP in:

- Central Ozarks Legal Secretaries Association       Lakes Area Legal Support Professionals  
 Franklin County Association of Legal Professionals       NALS of Greater St. Louis  
 Heart of America Legal Professionals Association       Springfield Area Legal Support Professionals  
 Kansas City Legal Secretaries Association       St. Louis County Association for Legal Professionals  
 Tri-County Association for Legal Professionals

I am applying for SECONDARY MEMBERSHIP in:

- Central Ozarks Legal Secretaries Association       Lakes Area Legal Support Professionals  
 Franklin County Association of Legal Professionals       NALS of Greater St. Louis  
 Heart of America Legal Professionals Association       Springfield Area Legal Support Professionals  
 Kansas City Legal Secretaries Association       St. Louis County Association for Legal Professionals  
 Tri-County Association for Legal Professionals

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

CURRENT PHONE NUMBERS:

Home: (\_\_\_\_) \_\_\_\_\_

Business: (\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_\_

### Instructions For Secondary Membership Application:

Contact the Local Membership Chairman of the chapter you desire a Secondary Membership in for the chapter's Secondary Membership fees. Membership is for one year from the date of application and renewals of Secondary Memberships must be submitted with an application and appropriate fees each year.

### Instructions For Completion:

Send Original to: Membership Chairman of Secondary Chapter along with Secondary Membership Fee  
Send a Photocopy to: NALS of Missouri Membership Chairman