



AUSTIN LPA, INC.

Application for Secondary Membership

Name _____

NALS Primary Membership _____

NALS Member Number _____

Please designate preferred address Home Office

Home Information

Address _____

City/State _____

Telephone _____

Email _____

Office Information

Employer _____

Address _____

City/State _____

Telephone _____

Email _____

Other Information

Birthdate (Month/Day) _____

Years in Legal Profession _____

Age Group Under 25 25-35

46-55 56-64 Over 65

Type of Law Office

- Law Office Corporate Legal Department Self-employed Court System
- Government Service Service (Please specify) _____

Primary area of law in which you work _____

Date _____

Signature _____

Referred by _____

Dues for secondary membership in Austin LPA, Inc. are \$15.00. Secondary membership is valid for one year from the date on this form (renewable annually).

Please return this form and a check made payable to Austin LPA, Inc. to:

Trudy Rush
 Vice President
 Thompson, Coe, Cousins & Irons, L.L.P.
 701 Brazos Street, Suite 1500
 Austin, Texas 78701
trush@thompsoncoe.com