

**Sustaining Membership Application**



This application is to be completed by organizations, associations, law firms, agencies, consultants, paralegals, and others interested in paralegal education. This is a non-voting membership category.

**Name of Applicant:** \_\_\_\_\_

**Company/Affiliation:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Applicant**  
(Digital signature or “/s/ First Name & Last Name” acceptable)

\_\_\_\_\_  
**Date**

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**This form can be submitted as an attachment with all required supporting documentation and payment information to: [info@aafpe.org](mailto:info@aafpe.org)**

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**Sustaining membership fee is \$525.00 per membership year (January 1 – December 31)**  
**Membership Dues are non-refundable.**

Contributions or gifts to the Association are not deductible as charitable contributions for Federal income tax purposes. Dues payments are deductible by members as an ordinary and necessary business expense

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