**2023 PARALEGAL DIVISION MEMBERSHIP RENEWAL**

# Submit by January 16, 2023

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name:** |  | **Title:** |  | **Bar #:** |  |
|  |  |  | **(e.g. CP, RP)** |  |  |
| **Law Firm/Organization:** |  |
| **Mailing Address:** |  |
| **Business Telephone #:** |  | **Business Fax #:** |  | **E-mail:** | Primary:Secondary: |
| **Residence Address:** |  |
| **Residence Telephone #:** |  | **Practice Area(s):** |  | **Firm Size:** |  |

 **Please check here if any of the above information has changed and those changes have not been reported to the Membership Committee.**

|  |  |  |
| --- | --- | --- |
| I, |  | hereby attest as follows: |

I meet the qualifications of a paralegal as defined by the New Mexico Supreme Court inRule 20-102 NMRA 1981, as amended through 2004.

I meet the employment qualifications found at Rule 24-101A NMRA 2004 (I contract with or am employed by an attorney, law firm, corporation, governmental agency or other entity and perform substantive legal work as defined in Rule 20-102 NMRA). (It is no longer necessary to provide an attorney affidavit with your renewal.) **If you do not qualify to renew your membership, please submit an Inactive Status Application which can be found at** [PDInactiveStatusApplication.pdf (sbnm.org)](https://www.sbnm.org/Portals/NMBAR/AboutUs/PD/PDInactiveStatusApplication.pdf?ver=xoE_4o-z66rLqMc4VemofA%3d%3d)

I have met, or will meet prior to February 1, the Division’s minimum continuing legal education (“CLE”) requirements and acknowledge that my CLE records are subject to verification for compliance prior to acceptance of my renewal. (You will no longer receive a printed CLE report of your hours earned as you have in the past. It is your responsibility to acquire, submit and verify completion of twelve (12) hours of CLE annually.) **To check your CLE records, go to** [CLE Resources (sbnm.org)](https://www.sbnm.org/Leadership/Divisions/Paralegal/CLE-Resources) Note: By signing your name below, you are agreeing to the provisions of this attestation and indicating your understanding of its provisions.

|  |  |
| --- | --- |
| Print Name |  |
| Sign Name |  |

Complete and submit the electronic form if you are paying by credit card. If you are not paying by credit card, complete this printable renewal form and forward the form and payment ($75 or $100 after January 16, 2023) with a check or money order made payable to:

Paralegal Division
PO Box 92860
Albuquerque, NM 87199-2860

Payment must be received before renewal will be processed. Please retain a copy for your records.