

## ASSOCIATE MEMBERSHIP APPLICATION 2024-2025 BAR YEAR

Name	·	
Firm/	/Company/Agency:	
Title:		DOB: (Month/Day)/
Maili	ng Address:	
E~ma	il:	Phone:
Practi	ce Area(s):	
I am i	interested in learning more about the following EPW be considered for future volunteer opportunities:	
<u> </u>	Positive Role Model Program Charity Adoption Day CLE & C Mentorship Program – Mentors in Law & Equality	Bash Other Programming
	interested in serving as an unpaid and non-voting cable option):	"Associate Member" (please check
	Current Law Student: School Paralegal/Legal Secretary/Other Legal Pro	
	ı would like to register online, scan this QR code our website: elpasowba.com/membership	or Section

\*\* The LCFEP is a 501(c)(3) non-profit organization created by officers of the EPWBA in 2006, which was formed to enhance the rule of law and system of justice; to educate the public about the role of law and the legal system; to advance the cause of justice, the cause of women and the causeof young people; to nuture and improve the relationship among lawyers and the community; and to enhance and expand educational opportunities for El Paso area young people.

<u>OPTIONAL</u>: I am interested in making a tax-deductible donation to the Legal Charitable Foundation of El Paso in the amount of \$\_\_\_\_\_. \*\*Please make checks payable to the LCFEP.

Please return your completed form, along with your payment to:

The El Paso Women's Bar Association

c/o Kate Godinez, President

401 Boston Ave., El Paso, Texas 79902

or email your completed form to: kate@sglawpllc.net