NAALJ Membership Application and Questionnaire

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Membership Application and Questionnaire

NATIONAL ASSOCIATION OF
ADMINISTRATIVE LAW JUDICIARY
Mail to: NAALJ, 1001 Office Park Road, Suite 105, West Des Moines, IA 50265
Email: NAALJ@NAALJ.org; Website address: www.naalj.org
Telephone/Fax: 515-440-6057

Please answer all questions fully. Type or print.

1) Name/Address:

__________________________________________________________
First
__________________________________________________________
M.I.
__________________________________________________________
Last
Address

City ____________________________
State ____________________________
Zip ____________________________

2) Home Telephone (   ) _______________

3) Business Telephone (   ) _______________

4) Fax number (   ) _______________

5) E-mail address ____________________________

6) Title (ALJ, Hearing Officer, Agency Director, private practice, Professor, etc.):

_________________________________________________________

7) Name of Agency: _______________________________________

8) Business Address:

_________________________________________________________
Street

City ____________________________
State ____________________________
Zip ____________________________

9) Please send mail to: _____ Home Address _____ Business Address

Check enclosed for:

_____ $50 Active Member

_____ $100 Sustaining Member