



## MEMBERSHIP APPLICATION

Name: \_\_\_\_\_

Firm: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone/Fax \_\_\_\_\_ / \_\_\_\_\_

E-Mail: \_\_\_\_\_

Web Site: \_\_\_\_\_

NELA Member: Yes / No

- I wish to join the Western Pennsylvania Employment Lawyers Association (“WPELA”), an affiliate of the National Employment Lawyers Association (“NELA”).
- I certify that 51% or more of my employment-related legal representation is on behalf of employees.
- I agree to pay membership dues in the amount of \$50.00 per year.<sup>1</sup>
- I agree to regularly participate in meetings and initiatives of WPELA, and further agree to make contributions to the WPELA Brief Bank.
- I will maintain the confidentiality of discussions at WPELA meetings and of messages on the WPELA Listserv.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

Return this Application to the Affiliate Secretary and Treasurer. For 2024, the Affiliate Secretary and Treasurer is Rachel McElroy, c/o McElroy Law Firm, 960 Penn Avenue, Suite 1001, Pittsburgh PA 15222 (rachel@mcelroylawfirm.com). Upon review of your application and approval by the Membership Committee, you will receive an e-mail acceptance at which time you will be invoiced for dues.

<sup>1</sup> New members receive a \$10 discount.