

North Carolina Bar Association Privacy & Data Security Section (PDS) Affiliate Application

Please complete the information below. This information will be used to maintain your individual membership record.

1. Name & Contact Information

Salutation: Mr. Ms. Other: _____

Applicant Name: _____

Firm/Organization: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____ County: _____

Street Address: _____

City: _____ State: _____ ZIP: _____ County: _____

Phone: _____ Fax: _____

Email (required): _____ Date of Birth: _____

2. Gender & Race/Ethnicity (optional) | For demographic purposes, please identify your gender and race/ethnicity below:

Male Female

African-American

Asian-American

Caucasian

Hispanic

Native American

Other: _____

3. Description

The Privacy & Data Security Section serves lawyers who practice in the areas of privacy and data security law. The Section is concerned primarily with bringing together members of the NCBA with a special interest in privacy and data security law practice, and furthering the development of the law in these fields. Affiliate membership is open to non-lawyer professionals who are actively engaged in the fields of privacy and data security by developing or implementing products; providing services; or engaging in a profession involving teaching or research.

4. Privacy & Data Security Section Affiliate Membership Eligibility Requirements

“Affiliate” or “Affiliate member” means any person not admitted to practice law in any state who currently is actively engaged in, and, for at least the two years immediately preceding the person’s Affiliate membership application, has actively engaged in (a) a profession involving teaching, education, or research in the field of privacy or data security; (b) developing and implementing products, or providing services, that are directly related to privacy and data security; or (c) employment by a corporation or law firm in a managerial or executive-level information technology or compliance position with primary responsibility for privacy and data security issues.

Applicant Signature: _____ **Date:** _____

(Application continued on reverse)

5. Sponsoring Attorney (Must be a PDS Section Member)

I hereby verify that _____, the Applicant, qualifies as an affiliate member as stated in the Eligibility Requirements above.

Sponsoring Attorney Name: _____ NCBA Number: _____

Sponsoring Attorney Signature: _____ Date: _____

6. Payment | PDS Affiliate Membership | \$90

Credit Card

Name as it Appears on Card: _____

Type of Card: American Express Visa MasterCard Discover

Card Number: _____ Exp. Date: _____

Authorized Credit Card Signature: _____

Check | Make payable to the NC Bar Association.

Return this completed application to NCBA Member Services, 8000 Weston Pkwy., Cary, NC 27513, or membership@ncbar.org.