



Application for Individual Membership

Personal Details

1

Family Name:	<input type="text"/>	Date of Birth:	<input type="text" value="DD"/>	<input type="text" value="MM"/>	<input type="text" value="YY"/>
Other Names:	<input type="text"/>				
Mr/Mrs/Ms/Other (please state)	<input type="text"/>	Nationality:	<input type="text"/>		
Designatory letters:	<input type="text"/>				
Address (to which correspondence will be sent):	<input type="text"/>				
	<input type="text"/>				
Postcode:	<input type="text"/>	E-mail	<input type="text"/>		
Daytime Tel No:	<input type="text"/>	Daytime Fax No:	<input type="text"/>		
Home Tel No:	<input type="text"/>	Home Fax No	<input type="text"/>		

2

Principal Profession (Please indicate by ticking box):

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Banking/Finance	<input type="checkbox"/> Commodities	<input type="checkbox"/> Construction	<input type="checkbox"/> Dental/Medical	<input type="checkbox"/> Sport
<input type="checkbox"/> Engineering	<input type="checkbox"/> Insurance	<input type="checkbox"/> IT	<input type="checkbox"/> Maritime	<input type="checkbox"/> Land/Property	<input type="checkbox"/> Law

Other (please give details)

Present Post/Appointment/Occupation:

Name and Address of Employer:

Nature of Business of Employer:

Languages written/spoken:

To: The Board of The Anglo-Russian Law Association:

I enclose a cheque for £ payable to "The Anglo-Russian Law Association" and wish to become a member of The Anglo Russian Law Association, subject to the provisions of the Memorandum and Articles of Association and the Rules. I agree to pay to the Association an amount of up to £10 if the Association is wound up while I am a member or for up to 12 months after I have left the Association.

Signed: Dated: