



ASSOCIATION OF CORPORATE LAWYERS SRI LANKA
MEMBERSHIP APPLICATION FORM

Please fill this form in BLOCK LETTERS

01. Name in Full :
Mr./Mrs./Others... Surname Other Names
02. Name of Institution :
03. Applicant's designation in the Organization :
04. Address (*Residence*) :
.....
Tel: Fax:
05. Address (*Office*) :
.....
Tel: Fax:
06. Applicant's date of enrolment as an Attorney-at-Law:
07. Please tick the appropriate Box
- i) Please include my name in the Data-base of Corporate Lawyers
- ii) Please include my name in the Life Members list
- Life Membership Fee : Cash/Cheque No. Amount : Rs. 1,000/-
Name of the Bank :

All cheques should be drawn in favour of "Association of Corporate Lawyers Sri Lanka".

.....
Signature of Applicant.

.....
Date.