



WESTERN AUSTRALIAN BAR ASSOCIATION

APPLICATION FOR MEMBERSHIP (INTERSTATE)

1. Surname:
- Given Names:
2. Business Address:
- Telephone: (Business)(Private)
- (Mobile) (Facsimile)
- Email:
- Private Address:
3. Date of Admission in WA:
- Elsewhere :
4. Save as set out on the schedule hereto,
 - (a) I am not aware of any complaint or any illegal or unprofessional conduct or of any complaint of neglect or undue delay which has been made against me to any body which considers complaints against legal practitioners.
 - (b) No finding of unprofessional or other similar conduct has been made against me.
 - (c) There are no facts or matters which may tend to show that I am not a person suitable for membership to the Association

5. References from two full-time practising members of the Association¹ are attached.
6. I have professional indemnity insurance cover of at least \$2 million.
7. I hereby undertake, if elected, to abide by the Constitution and Rules of the Association and at the first convenient opportunity to appear before an ordinary sitting of the Full Court of the Supreme Court of Western Australia and there to announce myself and give an undertaking to practice only as a barrister

DATED the day of 20

SIGNED

Please return your completed application to:

Executive Officer
Western Australian Bar Association
16th Floor, Allendale Square
77 St Georges Terrace
PERTH WA 6000

Phone: (08) 9220 0477
Facsimile: (08) 9221 5781

¹ Usually the references should be provided from members of the Association who have known the applicant professionally for 5 years.

THE WESTERN AUSTRALIAN BAR ASSOCIATION
APPLICATION FOR MEMBERSHIP (INTERSTATE)
SCHEDULE

Full details are set out hereunder of any matters falling within the following descriptions –

- (a) Any finding of unprofessional or unsatisfactory or other similar conduct made against me.
- (b) Any complaints of illegal or unprofessional conduct or unsatisfactory conduct or of neglect or undue delay made against me to any body which considers complaints against legal practitioners.
- (c) Facts or matters which may tend to show that I am not a person suitable for membership of the Association.

Dated the day of 20

Signed (Applicant)

Signed (Referee)

Usually the references and schedules should be provided from members of the Association who have known the applicant professionally for 5 years.

THE WESTERN AUSTRALIAN BAR ASSOCIATION

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