

THE LAW SOCIETY OF SINGAPORE ASSOCIATE MEMBERSHIP APPLICATION FORM

ALL SECTIONS MUST BE COMPLETED ACCURATELY AND IN FULL.

SECTION 1 – PARTICULARS OF APPLICANT
Name of applicant: Mr/Mrs/Ms
Date of birth:/ (Day/Month/Year) Gender: M/F
Last 4 Digits of your FIN/Employment Pass No.:
Nationality: Ethnic Group:
Email address: Name of Employer:
Residential Address:
Office Address:
Office number: Mobile number:
Kindly indicate your preferred mailing address:
Would you like to be listed on the <i>Associate Membership Directory on the Law Society website</i> ? (Note: Only your full name and organisation information will be displayed) Yes / No
SECTION 2 – ELIGIBILITY FOR MEMBERSHIP UNDER SECTION 40A OF LEGAL PROFESSION ACT
(1) □ (A) I am a foreign lawyer registered with Legal Services Regulatory Authority ("LSRA") under Section 36(c) of the Legal Profession Act
SECTION 3 – DECLARATION OF APPLICANT
I am applying under Section 40(A)(2) of the Legal Profession Act and I declare that my registration with LSRA has not been cancelled or suspended.
You acknowledge that, by submitting this application form, you have read and understood the Law Society's Data Protection Policy* (the "Policy"), and consent to the collection, use and disclosure of your personal data by the Law Society for the purposes set out in the Policy
*www.lawsociety.org.sg/privacy-policy-2/
Date:
Signature of Applicant
FOR OFFICIAL USE ONLY
Approved by:
Name: