



राष्ट्रीय अधिवक्ता परिषद National Advocate Council

APPLICATION FORM FOR MEMBERSHIP

To,

The General Secretary,
The **National Advocate
Council** 513 Prime
Plaza, Indira Nagar
Lucknow - 226016

Advocate
Photo
In Proper
Manner

Dear Sir,

Please enroll me as a Member of the National Advocate Council.

1. Personal Details (In Block Letters)

1	Name in full (In Block Letters)	
2	Father's Name/Husband's Name:	
3	Date of Birth	
4	Nationality	
5	Address for Correspondence with PIN and Phone No	
6	Permanent Address with PIN and Phone No.	
7	Address of Office/Chamber, if any and Phone No	
8	Mobile No.	
9	Email ID	
10.	Date of Enrolment as an	

	Advocate and its Number with the Bar Council (attach copy of Enrolment Certificate)	
11.	Enrollment No.	

**Signature of Advocate
With Seal**

UNDERTAKING

1. I hereby confirm and declare that the information furnished in the application and in the attached certificate is true/correct and complete to the best of my knowledge and belief. I have not concealed any relevant information. I am fully aware that if any of the information furnished by me is found to be false /incorrect, my candidature for the empanelment will be treated as cancelled and matter will be referred to the appropriate authority.

2. I also undertake to maintain absolute secrecy about the cases of the National Advocate Council as required under the Act, Rules and Regulation there under.

3. I also undertake to return all case files and records to the National Advocate Council as and when required by the National Advocate Council.

4. I agree with the fee schedule notified by the National Advocate Council

5. No criminal or administrative proceeding is in process against under signed in any organization, council or Court of Law.

Place:
Date:

Signature of Advocate