

**MEMBERSHIP FORM**

I wish:  to join AMCA  to update my existing membership

I am:  a barrister  a solicitor  a student

a non-practising lawyer and am interested in Military law.

[Tick as appropriate]

**Title** [Mr/Mrs/Ms/other (specify)] \_\_\_\_\_

**Name** \_\_\_\_\_

**Organisation** \_\_\_\_\_

**Professional address** [Please include post code]

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ DX: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Mob: \_\_\_\_\_

E-mail \_\_\_\_\_

**About myself**

Date of call / Admission \_\_\_\_/\_\_\_\_/\_\_\_\_

Bar ID/ Roll Number \_\_\_\_\_

Inn [if applicable] \_\_\_\_\_

Higher Rights speciality [if applicable] \_\_\_\_\_

**Interests:** I am interested in helping AMCA with the following activities:

Seminar lecturing  Regional meetings  General administration

Law reform  Articles  Press and public relations

*(Anything you wish to add:)*

**Data Protection Act 1998 Notice:** (1) These details will be used for AMCA purposes only unless you otherwise consent. (2) If your personal details change at any time please let us know at once.

**Please return this form to**  
Mr Matthew Bolt, Membership Secretary  
54 Hilda Wharf, Aylesbury, Buckinghamshire HP20 1RJ  
**A Standing Order form will then be forwarded to you in due course**