

REQUEST FOR MEMBERSHIP – COLLECTIVE OR ASSOCIATE MEMBERS

PLEASE RETURN BY EMAIL AT : info@bpi-icb.com OR BY FAX AT : + 33.93.405.14.24

BOTH COLLECTIVE AND ASSOCIATE MEMBERS MAY USE THIS FORM :

Article 5 ICB Constitution : « *Membership:*

3. *The following may be admitted as collective members :*

a. *Bars*

b. *Associations of counsel*

4. *Any other association concerned with the role of counsel at the Court may be accredited as an associate member:*

5. *The Executive Committee shall decide on admission as a member or accreditation as an associate member. Conditions of admission or accreditation as a member or associate member shall be determined by the Council [...].”*

Article 1 ICB Constitution : « *Definitions*

The following words or acronyms shall bear the following meanings in this Constitution:

Association of counsel—Independent association of legal practitioners or Bars, qualified for collective membership, and recognized as such by the Council.

Bar—An independent body of which counsel authorised to practice in the jurisdiction of the body are members, and recognized as such by the Council. In this Constitution, “Bar” refers also to Law Societies.”

1. Legal form of the organization: :

Bar/Law Society

O.N.G.

Association de counsel/attorneys

2. Name _____ Date of creation _____

3. Number of members _____

4. Is the membership to your organization compulsory ? Yes No

5. Address

P.O. Box / street address _____

City , Province or State _____ Zip Code and Country _____

Telephone _____ Fax _____ Email _____ Website _____

6. Name of the President of the organization _____

7. Term of the office. Starting date _____ completion date _____

8. Contact inside the organization for relations with the ICB:

Name : _____ email : _____

9. Official representative mandated to represent the organization. (If different from the contact person) :

Name : _____ email : _____

IMPORTANT: THIS APPLICATION MUST BE ACCOMPANIED BY THE DECISION OF THE ORGANIZATION WHICH NAMES THE PERSON DULY APPOINTED TO REPRESENT THE ORGANIZATION.

10. Name of the next President (if already designated) _____

11. Thank you to join the statutes of your organization and a description of your activity

12. Chosen language for communication with the ICB English French Spanish

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13. The organization is applying as: bar / law society
 O.N.G.
 association de counsel/attorneys

Article 10 ICB Constitution :« Elections to the Council:

2. A person may stand for election to the Council from only one of the above colleges. Representatives of Bars and associations of counsel must be qualified to be individual members.”

14. Your membership fees

Your membership's fees are valid for one calendar year.
We only accept payment in Euro.

Collective member: Bar / Law Society, Association of counsel /attorneys

1.000 > membres 750 €
1.000 < membres 1.500 €

Associate Member: N.G.O.

1.000 > membres 125 €
1.000 < membres 250 €

15. 18. Your payment

1)By credit card Visa Mastercard

Name of the credit card holder _____

Credit card number _____ CCV _____

Expiry date _____

Amount in Euro: _____

2) By bank transfer (exclusive or the payee)

Bank name : La Caixa

Account of : Barreau Penal Internacional

Account number : 2100-0555-33-0700193994

Code IBAN : ES13 2100 0555 3307 0019 3994 BIC: CAIXESBBXXX

Address: Oficina 0555 – Diagonal – Carles III, Barcelona, Spain

I DO HEREBY AFFIRM THAT THE INFORMATION SUPPLIED IS, TO THE BEST OF MY KNOWLEDGE, TRUE AND CORRECT :

Signature _____ Name (in capital letters) _____

Date _____ Place _____

Stamp of the organization _____