

**IRISH WOMEN LAWYERS ASSOCIATION  
ANNUAL MEMBERSHIP APPLICATION FORM**

To renew or apply for your IWLA membership, please print and fully complete this form and send it together with the appropriate membership fee to:

**Irish Women Lawyers Association  
Law Library Distillery Building  
145 – 151 Church Street  
Dublin 7.**

The IWLA at all times aims to be in compliance with the Data Protection Acts 1998 and 2003 and as such is informing you that it retains your personal data solely for its own legitimate use, e.g. to contact you in relation to upcoming events; to inform you of matters of interest; to communicate matters of IWLA policy to you.

**Type of Membership** (Tick box)

Category A – Full Membership – individual annual fee is €30	<input type="checkbox"/>
Category B – Associate Membership – (non-lawyer with an interest in IWLA) €15	<input type="checkbox"/>
Category C – Law Student Membership (including pupils and apprentices) €10	<input type="checkbox"/>

Please complete relevant sections below

New Member                       Renewal                       Year \_\_\_\_\_

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Qualification: \_\_\_\_\_

Email address: \_\_\_\_\_ Tel no: \_\_\_\_\_

Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_ **DX:** \_\_\_\_\_

Organisation if applicable: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

Address Line 3: \_\_\_\_\_

Town/City: \_\_\_\_\_ County: \_\_\_\_\_

**A. Full Member**

What is your current professional status? (please tick one)

Judge     Barrister     Solicitor     In-house lawyer     Academic

If **Judge**, please specify in which Court: \_\_\_\_\_

If practising **Barrister**, please tick one.

Senior Counsel     Queens Counsel     Junior Counsel

If practising **Solicitor**, please tick one: Partner  Associate   
Sole Practitioner  Employee

If working “**in-house**”, please tick: Public sector  Private sector

Please indicate your area of work: \_\_\_\_\_

If a full-time **legal academic**, please specify your position.

Professor  Senior Lecturer  Permanent Lecturer

Temporary Lecturer  Other: \_\_\_\_\_

Please state in which institution you work: \_\_\_\_\_

### **B. Associate Member**

Please state nature of post held, and organisation if applicable: \_\_\_\_\_

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### **YEARS OF EXPERIENCE**

**For all of the above professions, please state the number of years post-qualification experience you hold:** \_\_\_\_\_

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### **C. Student Membership**

What is your current status? Trainee Solicitor  Pupil (Devil)  Law Student

Organisation/Academic Institution: \_\_\_\_\_

Expected date of completion/graduation: \_\_\_\_\_

### **ALL MEMBERS**

**Whatever your status**, please indicate your areas of interest or practice (e.g. Criminal Justice, Family Law, Pensions etc.): \_\_\_\_\_

**Are you interested in becoming involved in IWLA at Committee or sub-committee level**  
\_\_\_\_\_ (YES/NO)

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### **Payment Details**

I enclose a cheque for €\_\_\_\_\_ made payable to the Irish Women Lawyers Association.

I enclose €\_\_\_\_\_ cash (e.g. at a conference).

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_