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## The NEWCASTLE UPON TYNE LAW SOCIETY

A Company Limited by Guarantee Company Number 00005506

## TRAINEES NOMINATION FORM FOR ASSOCIATE MEMBERSHIP

Mr/Mrs/Miss/Ms (Full I	Name)		Prefe	rred First Name
Name of Firm				
Address of Firm				
Telephone		Email *		
*Email addresses (if provided profession, your membership of				lating to the activities of the Society and the ce at the foot of this page.
We, the undersigned I mentioned person as a				Society, nominate the above
Signature of Nominator 1			Pı	int
Signature of Nominator 2			Pı	int
I confirm that I am a T	rainee Solic	itor with my Firm		
Please give the date o	f the comm	encement of your	Training Contrac	t
When do you expect to	o qualify?	Month		/ear
I agree to accept Ass	ociate Mer	nbership when e	lected;	
Signature of Nominee				Date
Please tick if you would 1. I would like to receiv 3. I would like to receiv 4. We have specialist day	ve the digita ve informati	l magazine Newca on about courses,	stle News 🔲 2. I seminars & lectur	

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