Please complete this form in BLOCK CAPITALS & return to alice.wylie@sussex-law.co.uk 1. Name of Firm/Organisation: 2. Name of Managing Partner/Head of Department: 3. Address of Main/Head Office: Telephone: Email: Website: 4. Locations of other offices where members may be located: 5. Number of Partners in Firm or Number of qualified solicitors in department: 6. Contact name & and address to which all correspondence regarding your corporate membership should be sent:

7. List of Members

Please provide a list of all qualified and trainee solicitors at the end of this application form (please mark trainees clearly) in your firm/organisation whom you wish to be treated as members of the Sussex Law Society under your firm's corporate membership. Those listed will be eligible for all of the benefits of the Society that individual membership carries and will each receive direct details of the Society's seminars, events and newsletters.

Please note that it is a condition of corporate membership that your firm notifies the Society (via the Operations Manager alice.wylie@sussex-law.co.uk) of any changes to your list during the course of the year.

8.	Privacy	Policy
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Data will be held in accordance with our Privacy Policy which can be found here.

9. Payment

Please see Corporate Subscription Membership Rates on the website.

On receipt of your application, you will be sent an invoice for payment of the subscription.

Signed:	
Position in Firm:	
Dated:	

List of Corporate Members

Please provide a list of qualified solicitors & trainees in your firm/department whom you wish to be treated as Sussex Law Society members under your firm's Corporate Membership. Please indicate trainees clearly. Please ensure that you sign it at the bottom.

Name of Firm Organisation:					
Title	Initials	First Name	Surname	Email address	
	1	1			

List of Corporate Members (cont)

Please provide a list of qualified solicitors & trainees in your firm/department whom you wish to be treated as
Sussex Law Society members under your firm's Corporate Membership. Please indicate trainees clearly. Please
ensure that you sign it at the bottom.

Name o	of Firm O	rganisation:		
•••••				
Title	Initials	First Name	Surname	Email address
		the Society holding		on its computer membership records and to using such
Signed:				
Position	n in Firm:			
Dated:				