

DECLARATION BY PROPOSER

PROPOSER'S NAME \_\_\_\_\_ Membership No \_\_\_\_\_

Firm's name \_\_\_\_\_

Address \_\_\_\_\_

Town \_\_\_\_\_ Postcode \_\_\_\_\_

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

Fax: \_\_\_\_\_ email \_\_\_\_\_

1. State how long you have known the applicant professionally
2. If the applicant has stated on the application form that he/she wishes his/her services to be listed on the Resolution website for referral purposes, are you completely happy for other members to contact the applicant for this purpose? (Tick)  YES  NO

I declare that:

- (a) I am a full member of Resolution
- (b) All of the above information is true
- (c) I consider the applicant a suitable person to be an affiliate member of the association
- (d) I understand that a false declaration may result in termination of my own membership of the association

Signed \_\_\_\_\_

Date \_\_\_\_\_

APPLICATION  
FOR  
AFFILIATE MEMBERSHIP  
OF  
RESOLUTION

RESOLUTION CENTRAL OFFICE, PO Box 302, Orpington BR6 8QX. DX: 154460 Petts Wood 3

Office use only

Date of election \_\_\_\_\_

Membership number \_\_\_\_\_

## APPLICATION FOR AFFILIATE MEMBERSHIP OF RESOLUTION

Mr. Mrs. Miss. Ms. Other. \_\_\_\_\_

Forenames \_\_\_\_\_

Surname \_\_\_\_\_

Firm's name \_\_\_\_\_

Address \_\_\_\_\_

Town \_\_\_\_\_

Postcode \_\_\_\_\_

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

Tel: \_\_\_\_\_

Fax: \_\_\_\_\_

Email address: \_\_\_\_\_

Firm's email: \_\_\_\_\_

Firm's Website: \_\_\_\_\_

Category: (please tick below)

SUBSCRIPTION FEE 2009

Date of joining Jan-Jun Jul-Dec

<input type="checkbox"/> Law lecturer/academic	£81.00	£40.50
<input type="checkbox"/> Trainee solicitor	£81.00	£40.50
<input type="checkbox"/> Lawyer from other jurisdiction	£81.00	£40.50
<input type="checkbox"/> Mediator (Resolution trained/converted)	£81.00	£40.50
<input type="checkbox"/> Mediator * (other than Resolution trained)	£81.00	£40.50
<input type="checkbox"/> Expert witness * (please specify which area of expertise) Max 25 letters _____	£81.00	£40.50
_____		
<input type="checkbox"/> Family therapist/counsellor *	£81.00	£40.50
<input type="checkbox"/> Independent financial advisor *	£81.00	£40.50
<input type="checkbox"/> Barrister	£81.00	£40.50
<input type="checkbox"/> Guardian ad litem *	£81.00	£40.50
<input type="checkbox"/> Non practising solicitor	£81.00	£40.50
<input type="checkbox"/> Law student	£29.00	£14.50
<input type="checkbox"/> Members on parental leave/career break/long term sick Leave	£29.00	£14.50
<input type="checkbox"/> Judges	£81.00	£40.50
<input type="checkbox"/> Retired solicitors/ judges/ law lecturers	£29.00	£14.50
<input type="checkbox"/> Other (please specify)	£81.00	£40.50

Categories marked \* must belong to a professional association.

Please give name and address of Association and date you became a member.

Professional Association \_\_\_\_\_

Address \_\_\_\_\_

Tel no \_\_\_\_\_ Date of joining \_\_\_\_\_

Do you wish your contact details to go into the directory of affiliate members on the Resolution website? (Please tick)  YES  NO

I enclose a cheque made payable to Resolution for £

Please do not include membership fee with any other fee e.g. publications, seminars etc.

I have read and confirm that I support the principles of the Resolution Code of Practice.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

### **BEFORE RETURNING YOUR APPLICATION FROM, PLEASE CHECK:**

1. You have signed the application form above
2. Page 3 has been completed and signed by your proposer
3. You have enclosed a cheque for the correct subscription