

EPLAW

European Patent Lawyers Association

Application Form for Membership

To be completed and sent to:

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Name: _____

First name: _____

Firm: _____

Address: _____

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E-mail: _____

Bar or Law Society: _____

Year of Admission: _____

Approx. No of patent cases litigated:

Last year: _____ Total: _____

I hereby request my admission to the European Patent Lawyers Association.

The two members of the Association supporting my application are:

Name of 1st sponsor: _____ Name of 2nd sponsor: _____
(The applicant should preferably enclose the supporting letters from the two sponsors, which are not members of his own law firm)

I have read the Articles of incorporation of EPLAW and accept these as well as Regulations that may be enacted from time to time.

Date and Signature: _____