

Individuals details

Forename

Surname

Telephone

Fax

email

Date of birth

Address

Please select the type of membership that interests you:

Full Member

Associate Member

Overseas Member

Academic Member

Business details

Organisation

Position in organisation

Principal business address

Length of time spent with organisation and in what capacity

If time with the organisation is less than 5 years please give details of other firms in which you have been employed in the last 5 years

Additional information

Full or Associate Member Application

Full name of the Full Member of the ILA who has agreed to act as referee for the purposes of your application

Date when received authorisation to act as an Insolvency Practitioner (if applicable)

Additional information (continued)

Overseas Member Application

Full name of referee, either a Full Member or alternatively a suitable referee in the overseas jurisdiction (please supply contact address for overseas referee).

Academic Member Application

Full name of the Member of the ILA who has agreed to act as referee for the purposes of your application.

I agree that the ILA may contact the referee nominated by me to obtain a reference for the purpose of this application.

Details of technical insolvency/restructuring advice and/or insolvency administration carried out in the past 3 years (If you require extra space please attach an additional sheet).

Please Note:

A member is under an obligation to notify the Secretary by notice in writing of any change of address.

I ACCEPT THAT, IN ACCORDANCE WITH ARTICLE 8 OF THE ARTICLES OF ASSOCIATION, THIS APPLICATION IS DEEMED TO CONSTITUTE A WARRANTY THAT THE CONTENTS OF THE APPLICATION ARE TRUE.

I APPLY TO BE ADMITTED AS A MEMBER OF INSOLVENCY LAWYERS' ASSOCIATION LIMITED ON THE TERMS OF THE MEMORANDUM AND ARTICLES OF ASSOCIATION FOR THE TIME BEING IN FORCE AND AGREE TO BE BOUND BY THOSE TERMS.

BY SIGNING THIS FORM I AGREE TO: (1) THE PUBLICATION OF MY PROFESSIONAL CONTACT DETAILS ON THE ILA WEBSITE AND THAT THIS INFORMATION WILL BE AVAILABLE TO ILA MEMBERS AND THE GENERAL PUBLIC THROUGH THE WEBSITE; (2) RECEIVE REGULAR TECHNICAL AND LEGAL UPDATES AND OTHER COMMUNICATIONS FROM THE ILA BY EMAIL; AND (3) RECEIVE, FROM THE ILA, INFORMATION ABOUT ILA EVENTS, PRODUCTS AND SERVICES AND THE INSOLVENCY RELATED EVENTS, PRODUCTS AND SERVICES OF ILA MEMBERS WHICH WE FEEL MAY INTEREST YOU.

IF AT ANY TIME YOU NO LONGER WISH TO RECEIVE EMAIL COMMUNICATIONS FROM THE ILA YOU MAY OPT OUT EITHER VIA EMAIL BY CLICKING **HERE** OR BY FOLLOWING THE PROCEDURE TO "UNSUBSCRIBE" IN THE EMAIL THAT YOU RECEIVE.

I ENCLOSE A CHEQUE FOR THE SUM OF £360 (£300 PLUS VAT AT 20%) OR ASSOCIATE MEMBER FEE OF £162 (£135 PLUS VAT AT 20%) OR OVERSEAS MEMBER FEE OF £162 (£135 PLUS VAT AT 20% IF APPLICABLE) IN RESPECT OF MY ANNUAL SUBSCRIPTION TO THE INSOLVENCY LAWYERS' ASSOCIATION LIMITED.

NO FEE PAYABLE FOR ACADEMIC MEMBERSHIP.

Signature of applicant

Date

Once completed this form should be sent to;

The Insolvency Lawyers' Association
c/o Richard Allsop
Valiant House
4-10 Heneage Lane
London EC3A 5DQ