# COMMONWEALTH LEGAL EDUCATION ASSOCIATION
# INDIVIDUAL MEMBERSHIP APPLICATION FORM
## INDIA

*Fields marked with * are mandatory.*

*Completed forms/queries:* ***gs@clea.ac***

Name [in Block Letters] *

Affiliation *

Office/Professional Address *

City *

State/Province *

Zip/Postal Code *

Country *

Email *

Contact Phone Number *

## Previous CLEA Involvement/Participations (if any) *

Please list any previous involvement with CLEA activities or events.

## Subject Expertise *

Briefly describe your areas of expertise or interest relevant to CLEA's objectives.

## Possible Contributions / Vision for CLEA *

## Attachments *

Curriculum Vitae (CV) — mandatory enclosure.

## Membership Category & Fee *

| Membership Category | Eligible Designation / Affiliation | INR — India Fee |
|---|---|---|
| **Individual Annual** | Lawyers, legal professionals, academics and other eligible individuals in legal education/the legal profession | **₹7,500** |

## Bank Transfer Details (India)

| | |
|---|---|
| **Account Name** | Commonwealth Legal Education Association |
| **Account Number** | 14780100005959 |
| **Account Type** | Savings Account |
| **IFSC Code** | FDRL0001478 |
| **Bank** | Federal Bank |
| **Branch** | Mayur Vihar Phase I, Delhi |

*Please initiate payment only after receiving formal membership approval and payment confirmation from the CLEA Executive Committee; kindly share the transaction reference/UTR number with the Secretariat after transfer.*

***Membership Confirmation: Membership is subject to approval by the CLEA Executive Committee.***

Date:

Signature:

*(Kindly note: Fields marked with * are mandatory and must be completed.*