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(calls charged at 2p/min plus any additional charge from your mobile or landline operator)

## FELLOWSHIP MEMBERSHIP APPLICATION FORM (2)

First Name/s .....

Surname.....Mr/Mrs/Miss/Ms

Address.....

.....

.....Post Code.....Email.....

Telephone No: Home.....Work.....

Mobile.....Work Email.....

Employer name.....

Employer address.....

Employer contact name and position.....

Job Title.....

### Fellowship Membership Entry Eligibility

Minimum 5 years experience = **experiential\*** route

I am applying for my Fellowship Membership through the **experiential\*** route and enclose a cheque for the non-refundable fee of £200 for processing my application, made payable to “NALP”.

I am applying for my Fellowship Membership through the **experiential\*** route and have paid £200 non-refundable fee online.

**I declare that I have read and meet the entry requirements for Fellowship Membership and I am aware of the NALP membership Rules and will be bound by them:**

Signed.....Date.....