

THE AUSTRALIAN FEDERATION OF INTELLECTUAL PROPERTY ATTORNEYS FICPI AUSTRALIA

PROPOSAL FOR MEMBERSHIP - PATENT ATTORNEYS - PART A

(do not pay fees until membership approved)

Name:				
Firm Nan	ne or Business Name:			
Street Ac	ldress:			
Postal Ad (if differe				
Telephor	ne No.:		Facsimile No.:	
E-mail A	ddress:			
Date of R	Registration as a Patent	Attorney in Au	stralia:	
I state that	at:			
1.	My primary endeavour	is as a patent	attorney.	
2.	I have at least five (5) y Australia or overseas.	ave at least five (5) years experience as a patent attorney since registration as a patent attorney in stralia or overseas.		
3.	I do not practise only o	do not practise only on behalf of one client, or an affiliated group of clients, to the exclusion of other lents.		
4.	I understand that before being approved for membership of FICPI Australia I shall be required t undertake to abide by the Articles of Association and By-Laws of the Association.			
	Signed:		Dated:	
	olgrica:			
(must be a member of FICPI Australia of at least 5 years standing)		Name:		
		Signature:		
Seconder: Name: (must be a member of FICPI Australia		Name:		
of at least 5 years standing and from a firm other than the firm of the Proposer) Signature:				
Return to	o: Secretary, FICPI A	ustralia, GPO E	Box 2752, Adelaide, SA 5001.	
COUNCI	L USE ONLY			
Application Received:				
Proposal Forwarded: (with Articles of Association and By-Laws)				