

**Junior Chamber Membership Application Form**

Title, Name & Surname: \_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_

Tel No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Website: \_\_\_\_\_

Skype: \_\_\_\_\_ I.D. Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Year of Study: \_\_\_\_\_

**Data Protection Act Provisions**

Kindly tick if you would NOT like to have your personal details available to the public

Kindly tick if you would NOT like to have your mobile number available to the public

**Membership Fees:** Membership of the Junior Chamber is €25 annually.

Payment options: (a) Bank Deposit or Internet Transfer\* in BOV account Number 40021887932

(b) Cheque attested to 'Chamber of Advocates'

*\*With the bank deposit or internet transfer please ensure submission of name and surname of the applicant.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For office use only:

Membership Number: \_\_\_\_\_