

IBA Young Lawyers' Committee National representative application form

(Please give as much information as possible; use a separate sheet if necessary)
Full Name
Age
COUNTRY that you would like to represent
Country and city of residence
Firm/Organisation currently employed with
Email
Qualifications
Are you IBA member? Yes No
Membership of professional organisations/special interest groups/associations
Specialist areas of practice within the country/city you would like to represent
Please provide details of any Young Lawyers Association in your country/city where you are involved in
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Do you intend to attend the next big IBA Co	onferences?					
a) IBA Virtual event, October 2021	Yes	No				
b) Miami, Florida, USA 2022	Yes	No				
Do you plan to attend any other upcoming	IBA events/web	oinar?	Yes	No		
If yes, please provide details.						
By affixing your signatures below you confir	rm that the info	ormation state	d above is	accurate and tha	t:	
you have read the information and dutie same;	es on IBA Young	g Lawyers' Cor	mmittee Na	ational Represent	atives and agre	ee to be bound by the
2. you are a member of the IBA Young Law	vyers' Committe	ee, and				
3. agree to the personal details you submit the Privacy Notice for Applicants and the	•		eing kept v	vith a third-party,	and not with	the IBA, as outlined in
4. agree, if selected as National Representat	tive of the IBA's	YLC, to your	details (nar	ne, country, ema	il) being shared	d on the IBA website
(Affix your signatures here)						
Date						