APPLICATION FORM FOR MEMBERSHIP OF THE INTERNATIONAL OBSERVATORY OF LAWYERS IN DANGER

ACTIVE MEMBERSHIPS

Why join the Observatory?

- Participate in an international network of organisations dedicated to the protection of lawyers worldwide and thus contribute to the improvement of the rule of law.
- Take part in global discussions aimed at ensuring a more protective status for lawyers around the world.
- Contribute to and benefit from an information network concerning the situation of colleagues around the world, through alerts, the Observatory's newsletter and its annual report.

How to join the Observatory?

- Your national bar association or council can join the Observatory as an active member, your organisation will have to pay an annual subscription, will have the right to vote at the Observatory's General Assembly and may be elected to the Bureau;
- Send the membership application form to the President of the Observatory, Mr Basile Ader. Write to the following address: Observatoire international des avocats en danger, 11 place Dauphine, 75001, Paris or by email: avocatsendanger@avocatparis.org
- Attach the payment of your annual fee by cheque made payable to the Observatoire international des avocats en danger (addressed to the Observatoire international des avocats en danger, 11 place Dauphine, 75001, Paris) or by bank transfer (the RIB will be communicated by email on request).

The annual membership fee schedule for active members for 2018-2019 has been set as follows by the Bureau:

- 5,000 € for bars association with more than 5,000 lawyers.
- 2,500 € for bars with between 2500 to 4999 lawyers.
- 1,500 € for bars with between 1000 to 2499 lawyers.
- 1,000 € for bars with between 500 to 999 lawyers.
- 500 € for bars with less than 500 lawyers.

If you have any questions, please contact asouleliac@avocatparis.org or crodet@avocatparis.org.
APPLICATION FORM FOR ACTIVE MEMBERSHIP

Organization

Bar association – National Council – Lawyers association: …………………………………

Name of the organization: ………………………………………………………………………
Name and capacity of the legal representative: …………………………………………………

Address of the organization: ………………………………………………………………………
……………………………………………………………………

Number of adherents of your organization: ………
Web site of your organization: ………………………………………………………………………

Contact information

Identity and function of the contact from your organization:
………………………………………………………………………………………………

Address: ………………………………………………………………………………………
Tel: …………………………………………………
Email: …………………………………………………
Langage: …………………………………………………

☐ I acknowledge that I have read the purpose of the International Observatory of lawyers in
danger and its Statutes made available to me. I declare that I undertake to respect all the
obligations of the members of the association set out therein.

Done in …………………….., on ……………………..

Signature

If you have any questions, please contact asoueliac@avocatparis.org or crodet@avocatparis.org.