Identification Card Application



| Fill in the applicant's name and email address and then choose the type of card, either Solicitor ID Card OR Representative ID Card. Trainee solicitors please use Representative ID Card application box. Write in BLOCK CAPITALS please or the application may be rejected. See guidance notes overleaf. | |
|---|--|
| Applicant's First Name Surname | |
| Email Address | |
| CLSA member £ 25 | Non Member £ 35 (N1) |
| | |
| Solicitor ID Card | |
| Firm's name | Affix |
| Firm's principal tel. number to appear on card (N3) | |
| Practising Cert. No Duty PIN (if applicable) | Photo Here |
| Signed by Applicant *see undertaking below | (N2) |
| Date | |
| Poprocontative ID Card | |
| Representative ID Card (including trainee solicitors) Firm's Name | (NA) |
| LSC accreditation PIN (required) (N5) | Applicant |
| Signed by Applicant *see undertaking below | Photo Here |
| | (N2) |
| | |
| Name of Authorising Solicitor (N6) | . This is a true likeness of the applicant |
| Signed by Authorising Solicitor | Date |
| Authorising Solicitor's principal telephone number to appear on card (| N3) |
| Address where the card will be sent. (the representative card will only be s | |
| | |
| County Post Code DX Number | |
| - Colony | 3,7,7 and |

* PROFESSIONAL UNDERTAKING:

By signing above you agree to. (Delete words in [] if application for a card is by a duty/own solicitor). I/[We the representative and authorising solicitor] hereby undertake that I/We will notify the issuing authority at the address given overleaf if (a) the identification card issued is mislaid or lost at any time, [or (b) the authorised representative is no longer employed by the authorising solicitor or the authorising solicitor's firm] or (c) [there is a change in the practising address or there is any other material change in the information contained in this form, including giving up working as a duty solicitor and that such notification will be given within 14 days of the relevant event and that upon such notification the card holder will return the said card forthwith to the issuers. I/We further acknowledge that the card remains at all times the property of the issuers and will be returnable if at any time the issuers require the return of the said card.

CLSA DX 2740 Brighton

ID Card Suite 2, Level 6, New England House, Brighton, BN1 4GH

Will fit C4 envelope or fold here for DL envelope.

Notes/Help For Filling in the ID Card Application Form

| Note | | |
|-------------------|---|--|
| Contact Details | Email: id@clsa.co.uk Voicemail: 01273 676231 | |
| N1 Cheque Payment | CLSA members £ 25 Inc Vat (£20.83 plus VAT @ 20%) Non members £ 35 Inc Vat (£29.17 plus VAT @ 20%) Payable to 'CLSA Events Ltd' | |
| N2 Photograph | Passport size colour photo showing front of face of applicant in full. | |
| N3 | This should be your firm's principal telephone number to enable any checks to be made. | |
| N4 | Freelance representatives make an application in the normal way but leave the Firm's Name blank. "Freelance" will appear on the card. The authorising solicitor must sign the authorising section and the card will be sent to their address. | |
| N5 | As listed on the Register of Police Station Representatives 0845 543 8910 | |
| N6 | Representative ID Card applicant only. Solicitor ID Card applicant need not completete. The authorising solicitor may be contacted to confirm identity. | |
| | The dutionality adiction may be contacted to continuin defluty. | |
| N7 | All applicants to complete. | |