

**Mobile Email Details Collection Form for Advocates
(Please use CAPITAL LETTERS only)**

Court Complex			
Advocate Name	First Name	Middle Name	Last Name
Gender	Male/Female		
Date of Birth	DD	MM	YYYY
Bar Council Registration Number			
Residential Address			
Office Address			
District			
Email ID			
Mobile No.		Phone Office	
Phone Residence		Fax No.(If Available)	

Date:

Signature of Advocate: