

Mobile – eMail Details Collection form for Advocates
(Please use Capital Letters Only)

Court Complex			
District			
Advocate Name			
	Surname	Name	
Sex	Male/Female		
Date of Birth			
	DD	MM	YYYY
Bar Counsel Registration Number			
Residential Address			
Office Address			
District			
E-Mail ID			
Mobile Number			
Phone Office			

Date:

Signature of Advocate