



BLACK LAWYERS ASSOCIATION
MEMBERSHIP FORM
Striving for a transformed legal profession since 1977

NEW MEMBER <input type="checkbox"/> RENEWAL <input type="checkbox"/> (TICK)			
PERSONAL DETAILS			
Title (<i>Ms, Mr, Adv, Doc, Prof..etc</i>)			
First Name			
Last Name			
Identity NO: (<i>Certified copy to be attached</i>)			
Gender:	MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> (TICK)		
CONTACT DETAILS			
Work Physical Address			
Branch or Province			
Phone		Alt Phone	
Email			
OCCUPATION			
Law Firm/Organization/Institution			
Professional Status i.e. <i>Legal Practitioner (Advocate/Attorney), Magistrate, Prosecutor, Legal Advisor, Candidate Attorney, or Other.</i>			
Professional Membership (LPC) or Work ID			
Cell Phone		Work Phone	
Work Email			
<p>I _____ Full names] the undersigned declare that I voluntarily join the Black Lawyers Association and shall serve with commitments and abide by the constitution.</p> <p>Signature: _____ Date: _____</p>			

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PLEASE SEND THE FORM AND PROOF OF PAYMENT AS PER THE BELOW BANKING INFORMATION

ADMITTED LEGAL PRACTITIONER: R 1000.00

CANDIDATE ATTORNEYS: R 500.00

BRANCH	ACCOUNT NUMBERS	EMAIL ADDRESS
LIMPOPO:	FNB Account NO: 62413 7173 41, Branch Code: 260649	<i>limpoposecretary@blaonline.org.za</i>
GAUTENG	Standard Bank Account NO: 010 338780 Branch Code 010045	<i>gautengsecretary@blaonline.org.za</i>
WESTERN CAPE:	ABSA Bank Acc NO: 909 045 0662, Code: 632005	<i>westerncapesecretary@blaonline.org.za</i>
NORTHWEST:	Standard Bank Acc NO 033095000 Branch Code: 056133	<i>northwestsecretary@blaonline.org.za</i>
NORTHERN CAPE:	ABSA Bank account NO: 9067172560 Branch: Kimberly	<i>northerncapesecretary@blaonline.org.za</i>
FREE STATE	Standard Bank Account NO: 042068207 Branch Code 056133	<i>freestatesecretary@blaonline.org.za</i>
EASTERN CAPE	FNB Account NO: 53990115968	<i>easterncape@blaonline.org.za</i>
KWAZULU NATAL	Nedbank Account NO: 1380054850 Branch Code: 198765	<i>kznsecretary@blaonline.org.za</i>
MUMALANGA	FNB Account NO: 62241829087 Branch Code: 250016	<i>mpumalangasecretary@blaonline.org.za</i>

APPROVED ☐

DISAPPROVED ☐

Name and Surname:

Signature:

Date: