



Sussex Street

Community Law Service Inc.

APPLICATION FOR MEMBERSHIP OF THE ASSOCIATION

Name: _____

Home Address: _____

Home Phone: _____

Home Mobile: _____

Home Email: _____

Work Address: _____

Work Phone: _____

Work Fax: _____

Work Email: _____

I wish to apply for membership of Sussex Street Community Law Service Inc.

I agree to support the objectives and purposes of Sussex Street Community Law Service Inc as listed in the constitution.

Signature: _____

Date: _____