



MEMBERSHIP APPLICATION FORM

Criteria: expertise in your jurisdiction and experience of international law.

(* marked are mandatory questions)

1.	Forenames*	
2.	Surname*	
3.	Name of Firm and Address*	
4.	Telephone Number*	
5.	Email*	
6.	Nationality*	
7.	Jurisdictions in which you Practice*	
8.	Career History*	
(a)	Date of Admission to Practice	
(b)	Specialisation(s)	
(c)	International Cases (last 5 years)	
(d)	Professional Dealings with ABAL Members	
9.	Languages Spoken and Fluency*	
10.	Professional Organisations	
11.	Roll Number at local Regulatory Body	
12.	Law Firm Website URL	
13.	LinkedIn Profile URL*	
14.	Short Professional Bio (150 words max)	
15.	Preferred Involvement in ABAL (Speaking/ Blogs & LinkedIn posts/ Hosting Events/Case Referrals/ Networking)	
16.	2 Lawyer Referees or ABAL members who have recommended you	

17.	Any Other Relevant Information	
18.	Do you consent to your details being displayed on the ABAL website?	(Yes/No)

SELECT MEMBERSHIP TYPE

MEMBERSHIP TARRIFF	ANNUAL FEE	
SOLE OWNER/LAWYER 10 YEARS+	£300	<input type="checkbox"/>
JUNIOR LAWYER 3 – 10 YEARS	£180	<input type="checkbox"/>
LAWTECH COMPANIES/ACADEMICS, EMERITUS PROFESSORS, WRITERS, LEGAL SUPPORT SERVICES	£100	<input type="checkbox"/>
JUDICIARY	Honorary Membership	<input type="checkbox"/>

Membership entitles you to:

- Dedicated WhatsApp group** for daily peer support and networking
- Monthly virtual meetings** to share updates, insights, and best practices
- Hybrid seminars** featuring thought leaders and experts
- Invitations to exclusive seminars and events** throughout the year
- First consideration for case referrals** within the ABAL professional network

Coming soon:

- Your professional profile** featured on the **ABAL website**
- Searchable interactive map** to easily find and connect with ABAL members

Contact us if you wish to apply for consideration of a lower fee or payment plan (3 monthly instalments)

PAYMENT DETAILS

ABAL c/o AINA KHAN LAW

GBP	EUR	USD
<u>Account number</u> 64890373	<u>IBAN</u> BE59 9670 4727 4126	<u>Account number</u> 8310558561
<u>UK sort code</u> 23-14-70	<u>Bank code</u> (SWIFT/BIC)	<u>Bank code</u> (SWIFT/BIC)
<u>IBAN</u> GB17 TRWI 2314 7064 8903 73	TRWIBEB1XXX	CMFGUS33
		<u>Routing number</u> 026073150
<u>Address</u> Wise Payments Limited Worship Square 65 Clifton Street London EC2A 4JE	<u>Address:</u> Wise Europe Rue du Trone 100 3rd floor Brussels 1050, Belgium	<u>Address:</u> Wise US Community Federal Savings Bank 89-16 Jamaica Avenue Woodhaven, NY 11421, United States

DECLARATION

If my application is successful, I agree to abide by the highest standards of my profession and ABAL.

I agree that any certification issued by ABAL in my name shall remain the property of ABAL and shall be returned immediately if my membership is terminated.

I authorise ABAL to make enquiries of any legal professional association, whether international or local, as to my credentials and qualifications.

SIGNATURE

NAME

DATE



Please return this signed form to: secretary@abal.world