

QUEENSLAND PUBLIC INTEREST LAW CLEARING HOUSE INCORPORATED

APPLICATION FOR MEMBERSHIP

INDIVIDUAL MEMBER OR CONTACT PERSON.....  
 TITLE.....OCCUPATION /POSITION.....

FIRM OR ORGANISATION NAME.....  
 (if applicable)  
 .....NUMBER OF PARTNERS.....

ADDRESS.....  
 .....POSTCODE.....  
 TELEPHONE.....FAX.....  
 EMAIL.....  
 WEBSITE.....  
 Do you consent to the QPILCH website linking to your site? Yes  No  Does your firm have an existing formal pro bono scheme? Yes  No

<b>Areas in which you can offer pro bono services</b>			
Admin Law/FOI	<input type="checkbox"/>	Medical Law	<input type="checkbox"/>
ADR/ Mediation	<input type="checkbox"/>	Employment/IR	<input type="checkbox"/>
Professional Negligence	<input type="checkbox"/>	Environment	<input type="checkbox"/>
Banking/ Finance	<input type="checkbox"/>	Equity/ Trusts	<input type="checkbox"/>
Bankruptcy/ Insolvency	<input type="checkbox"/>	Family Law	<input type="checkbox"/>
Building/ Construction	<input type="checkbox"/>	Guardianship/ Administration	<input type="checkbox"/>
Children	<input type="checkbox"/>	Housing/ Tenancy	<input type="checkbox"/>
Commercial Law	<input type="checkbox"/>	Human Rights	<input type="checkbox"/>
Constitutional Law	<input type="checkbox"/>	Immigration/ Migration	<input type="checkbox"/>
Corporate Law	<input type="checkbox"/>	Industrial Relations	<input type="checkbox"/>
Consumer Law	<input type="checkbox"/>	Insurance	<input type="checkbox"/>
Criminal Law	<input type="checkbox"/>	Intellectual Property	<input type="checkbox"/>
Defamation/Media	<input type="checkbox"/>	Licensing/ Disciplinary Tribunal	<input type="checkbox"/>
Discrimination	<input type="checkbox"/>	Litigation	<input type="checkbox"/>
		Motor Vehicle	<input type="checkbox"/>
		Native Title	<input type="checkbox"/>
		Personal Injuries	<input type="checkbox"/>
		Planning/ Local Government	<input type="checkbox"/>
		Privacy	<input type="checkbox"/>
		Property Law	<input type="checkbox"/>
		Social Security/ Welfare	<input type="checkbox"/>
		Sports Law	<input type="checkbox"/>
		Superannuation	<input type="checkbox"/>
		Taxation	<input type="checkbox"/>
		Trade Practices	<input type="checkbox"/>
		Other.	<input type="checkbox"/>
		Please specify:.....	

**Annual membership fees (including GST)**

Law firm member	- \$220 per partner	<input type="checkbox"/>	Associate member	- \$330	<input type="checkbox"/>
Barrister member	- Nil First Year	<input type="checkbox"/>	Government legal unit	- \$1100	<input type="checkbox"/>
	- \$55 2-3 years experience	<input type="checkbox"/>	Corporate legal unit	- \$3300	<input type="checkbox"/>
	- \$110 4-5 years experience	<input type="checkbox"/>	Honorary/life member	- Nil	<input type="checkbox"/>
	- \$220 6+ years experience	<input type="checkbox"/>			

ATTACHED is a cheque for: \$....., being membership fees for the financial year 20.....- 20.....,  
 and a donation: \$....., payable to QPILCH .  
 If membership is accepted, a tax invoice and receipt will be issued. If membership is declined, your cheque will be returned.

I/we....., [on behalf of]..... hereby apply to become a member of QPILCH and agree to be bound by the rules of QPILCH for the time being in force and acknowledge that by lodging this application, I/we agree with the purposes of the Association as set out in the Association's rules.

Signed.....Date.....

Send to QPILCH, PO BOX 3631, SOUTH BRISBANE BC QLD 4101 Telephone: 07 3846 6317 Fax: 3846 6311

**Office use only**

Proposer.....Seconded.....Date.....

Approved at .....meeting date.