



# Commonwealth Association of Legislative Counsel

## MEMBERSHIP APPLICATION FORM FOR NEW MEMBERS

The Secretary, Commonwealth Association of Legislative Counsel, Room 6.16A, Attorney General’s Office, Government Buildings, Upper Merrion Street, Dublin 2, Ireland.

I, .....,

wish to apply to become a full member/an associate member# of the Commonwealth Association of  
Legislative Counsel.

(signed) ..... Applicant

*#Note: A person is eligible to become a full member of CALC if he or she is or has been engaged in legislative drafting or in training persons to engage in legislative drafting and is a Commonwealth person. A “Commonwealth person” is a person who is a citizen or a permanent resident of, or who is domiciled in, a country or territory that is a member of the Commonwealth of Nations. A person who is or has been so engaged but who is not a Commonwealth person is eligible to become an associate member of CALC. A person who is a Commonwealth person but is not or has not been so engaged is also eligible to become an associate member.*

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Please specify your–

*Office address* .....

..... *Post code* .....

*\*Home address* .....

..... *Post code* .....

*§Your office telephone no.* ..... *§\*Your home telephone no.* .....

*§Your office facs. no. (if any)* .....

*Your office e-mail address* .....

*Your personal e-mail address* .....

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After completing the form, send it to me electronically (e-mail) or by ordinary post. The e-mail address is [dr\\_duncan\\_berry@yahoo.co.uk](mailto:dr_duncan_berry@yahoo.co.uk) or [duncan\\_berry@ag.irlgov.ie](mailto:duncan_berry@ag.irlgov.ie)

§ Please do *not* forget to include your country code and area code.

\* These details are required, but if you have any objection to particulars of your home address or home phone number being published, please specify.

*Promoting the drafting of clear and effective  
legislation in the Commonwealth* . . . . .