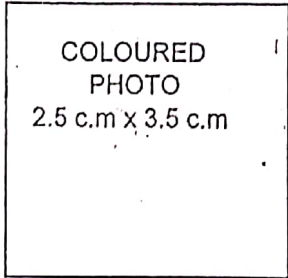


PROFORMA FOR "MEMBERSHIP DIRECTORY" OF ITBA



- 1) NAME:
- 2) DATE OF BIRTH:
- 3) DATE & ENROLMENT NO. WITH BAR COUNCIL OF WEST BENGAL:
- 4) DATE OF ENROLMENT AS MEMBER OF ITBA:
- 5) ADDRESS: OFFICE:
- RESIDENCE:
- 6) TELEPHONE NO: OFFICE:
- RESIDENCE:
- MOBILE:
- E-mail:
- 7) NAME OF SPOUSE:
- 8) BLOOD GROUP:

SIGNATURE OF THE MEMBER

DATE:

NOTES: i) Please enclose TWO COPIES COLOURED photo having size 2.5 c.m x 3.5 c.m-One photo is to be pasted in this FORM in the space provided and another will be delivered to the Office mentioning his/her NAME in the back side of photo.

ii) This FORM is to filled up all in CAPITAL LETTERS.except e-mail.