SINDH BAR COUNCIL

SINDH HIGH COURT BUILDING (ANNEXE) KARACHI
POST CODE NO. 74200
PHONE : 99203187 FAX-9 9205892
E-mail : admin@sindhbarcouncil.org
Web Site : www.sindhbarcouncil.org

ADVOCATE'S LIFE TIME MEMBERSHIP CARD FORM

(Applicable for all above 65 years practicing Advocates)

(TO BE FILLED WITH BLOCK LETTERS)

Please read instructions overleaf before filling the form

Two Recent Photograph 1-1/2 x 1-1/2 size in Court Dress

1. Advocate's Name _____
(As per Licence of Sindh Bar Council) **(BLOCK LETTER)**

2. S/o, D/o. W/o: _____

3. Registration / Ledger No. of Sindh Bar Council: _____ 4. District _____

5. Date of Birth: _____ 6. Blood Group _____
(As per Matriculation Certificate)

7. CNIC No: | | | | | | - | | | | | | | | - | |

8. Residential Address: _____

_____

9. Office Address: _____

_____

10. Date of Enrollment (As an Advocate) _____

11. Date of Enrollment (As an Advocate High Court) _____

12. Active Phone /Mobile No. _____ Mobile No. _____ Phone No: _____

13. E-mail: _____ Fax No.(if any) _____

Date: _____

_____
(Signature of Advocate)

Note: Photo copy form are acceptable
Fill From send us through TCS

Scanned with CamScanner