

**A.L.L. MEMBERSHIP**

1. I am proud to be a member of A.L.L. - Association of Legal Aid Lawyers.
2. I support A.L.L.'s goals of:
  - (a) Improving the legal aid system of B.C. by providing better legal services to the citizens of B.C.; and
  - (b) Improving the legal aid tariff to enable legal aid lawyers to provide better services to their clients.
3. To further A.L.L.'s goals I am prepared to withdraw legal aid services if a majority of A.L.L. members in my geographic practice area vote to do so.

**First Name:**

\_\_\_\_\_

**Last Name:**

\_\_\_\_\_

**I have a legal aid vendor number:**

**YES** \_\_\_\_\_

**NO** \_\_\_\_\_

**I am an articling student:**

**YES** \_\_\_\_\_

**NO** \_\_\_\_\_

**If you are a student, the name of your firm:**

\_\_\_\_\_

**Areas of law I presently practice:**

\_\_\_\_\_

**I am a member in good standing of the Law Society of British Columbia:**

**YES** \_\_\_\_\_

**NO** \_\_\_\_\_

**If you are not practicing lawyer or articling student describe your reasons for supporting A.L.L.**

\_\_\_\_\_

**Email:**

\_\_\_\_\_

**Phone:**

\_\_\_\_\_

**Signature:**

\_\_\_\_\_

**Once completed, please return this form by fax to 604 684 0799 or by email to [associationoflegalaidlawyers@gmail.com](mailto:associationoflegalaidlawyers@gmail.com)**