



THE AUSTRALIAN FEDERATION OF INTELLECTUAL PROPERTY ATTORNEYS  
FICPI AUSTRALIA

**PROPOSAL FOR MEMBERSHIP – PATENT ATTORNEYS – PART A**

(please do not pay any fee until membership has been approved)

Name: \_\_\_\_\_

Firm Name or Business Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Postal Address  
(if different): \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Facsimile No.: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Date of Registration as a Patent Attorney in Australia: \_\_\_\_\_

I state that:

1. My primary endeavour is as a patent attorney.
2. I have at least five (5) years of experience as a patent attorney since registration as a patent attorney in Australia or overseas.
3. I do not practise only on behalf of one client or an affiliated group of clients to the exclusion of other clients.
4. I understand that before being approved for membership of FICPI Australia, I shall be required to undertake to abide by the Articles of Association and By-Laws of the Association.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

Proposer:  
*(must be a member of FICPI Australia  
of at least 3 years standing)*

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Return to: Secretary, FICPI Australia, C/- Golja Haines & Friend, PO Box 1014 South Perth WA 6951 Australia  
Or email to rohan.wallace@ghfip.com.au

**COUNCIL USE ONLY**

Part A Application Received: Date/Sent by .....

Part B Forwarded: Date/Sent by  
*(with Articles of Association and By-Laws)* .....