



THE AUSTRALIAN FEDERATION OF INTELLECTUAL PROPERTY ATTORNEYS  
FICPI AUSTRALIA

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

(do not pay fees until membership 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. I am in independent practice as a Patent Attorney in Australia alone/in partnership.  
*(delete whichever is inapplicable)*
2. My primary endeavour is as a patent attorney.
3. I have at least five (5) years experience as a patent attorney since registration as a patent attorney in Australia or overseas.
4. I do not practise only on behalf of one client, or an affiliated group of clients, to the exclusion of other clients.
5. 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: \_\_\_\_\_ Name: \_\_\_\_\_  
*(must be member of FICPI Australia)*

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

Secunder: \_\_\_\_\_ Name: \_\_\_\_\_  
*(must be member of FICPI Australia)*

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

Return to: Secretary, FICPI Australia, PO Box 395, North Ryde, NSW 1670.

**COUNCIL USE ONLY**

Application Received: .....

Proposal Forwarded: .....

*(with Articles of Association and By-Laws)*