

**APPLICATION FORM FOR THE MEMBERSHIP OF THE FUND  
UNDER SECTION 16 OF THE ADVOCATES WELFARE FUND  
(Act No.15 / 1987)**

The Secretary  
Trustee committee  
JODHPUR

Please affix  
your  
Passport Size  
Colored  
Photo

**Sub : Application under section (16)**

Sir,

I apply to be admitted as member of the fund :

1. Name(in CAPITAL letters) : .....
2. Father's Name : .....
3. Date of Birth : .....
4. Address : .....
5. Enrolment No. and Date in the Bar Council .....
6. Phone No. .... Mobile No. ....
7. Date since practicing as
  - (a) Pleader .....
  - (b) Advocate .....
8. Name of Bar Association of which the applicant is member (Certificate of Recognised Bar Association be enclosed)  
.....
9. Period of Suspension of Practice from ..... to .....
10. Reason of Suspension .....
11. Whether the applicant was convicted by a Court of law for an offence of moral turpitude
12. Particulars of nomination
  - A. Name and Age of the nominees (in CAPITAL letters) : .....
  - B. Relationship : .....
  - C. Address : .....
  - D. Name of other legal heirs of I class as per succession law.  
(If there is more than one nominee, please specify amount or share payable to each of them as to cover whole of amount payable.)
13. Amount of Fees : Rs. .... in words .....
14. D.D. No. .... (A/c payee) .....
- (D.D. be prepared in favour of **Secretary, Rajasthan Advocates Welfare Fund.**)
15. Whether the applicant was ever removed from membership of fund, if so :
  - When .....
  - Why .....
  - Date of revival : .....
16. Any other details (if any) :  
.....  
.....

**DECLARATIONS**

- A. I hereby declare that the above particulars are true to my personal knowledge.
- B. I hereby undertake to abide with the provisions of Act, Rules and directions etc. made thereunder.
- C. I hereby undertake to pay subscription as required.
- D. I have not been enrolled / resumed practice after serving 15 years under any employer.
- E. I have attained the age of 45 years and am regularly practicing as an Advocate since my enrolment.

Date .....

Signature of applicant Advocate

Forwarded to the Secretary, Trustee Committee, RAWF, Jodhpur certifying that the applicant is a member of this Bar Association.

President / Secretary  
BAR ASSOCIATION  
with Seal.

Regin No. ....Dt.....

**RAJASTHAN ADVOCATES WELFARE FUND**  
**C/O BAR COUNCIL OF RAJASTHAN**  
High Court Building, Jodhpur - 342 001

No. RAWF / Adm

Dated .....

Shri \_\_\_\_\_ Advocate

\_\_\_\_\_

\_\_\_\_\_

Sub : Membership u/s 16 of the Rajasthan Advocates Welfare fund Act, 1988

Dear Sir,

Enclosed please find an application form for the membership of the Rajasthan Advocates Welfare fund.

The form may be returned duly filled in alongwith admission fee including yearly subscription mentioned below (as may be applicable). The form must be forwarded by the President/ Secretary of the Bar Association by putting seal of the Bar Association of which you are a member. (The Bar Association must be registered under the aforesaid Act with this office).

<b>ADMISSION FEE : (+)</b>	Rs.	<b>400.00</b>
<b>YEARLY SUBSCRIPTION :</b>		
(a) Less than 5 years practice	Rs.	<b>300.00</b>
(b) 5 years practice of more but less than 10 years practice	Rs.	<b>750.00</b>
(c) 10 years practice or more	Rs.	<b>1250.00</b>
<b>LIFE TIME SUBSCRIPTION</b>	Rs.	<b>17,500.00</b>

The period of yearly subscription runs from 1st July to 30th June of every year and the member is required to deposit the yearly subscription in advance which must reach this office on or before 30th June of every year. The D.D. may be prepared in favour of Secretary, Rajasthan Advocates Welfare Fund payable at Jodhpur.

Persons who have applied for enrolment after serving for 15 years or more anywhere **NEED NOT APPLY** for the membership to the fund as they are NOT ELIGIBLE to get the benefits out of the above fund.

Yours faithfully

**R.P. MALIK**  
Secretary

Encl. : Form u/s 16 (overleaf)