

**APPLICATION FOR MEMBERSHIP OF THE F.D.R.S.**

[Please note that if you are admitted to membership of the F.D.R.S., the details specified below in the first six rows will be used to provide some of your details in the online Register of Members of the F.D.R.S].

<b>FULL NAME</b>	
<b>YEAR OF CALL</b>	
<b>YEAR SILK TAKEN</b>	
<b>STABLE</b>	
<b>PRACTICE MANAGER and his/her Email</b>	
<b>PRACTICE MANAGER Tel. number</b>	
<b>FSL ACC No.</b>	
<b>CATEGORIES in respect of which membership sought</b>	<b>ARBITRATOR MEDIATOR ADJUDICATOR EXPERT DETERMINATION</b> <b>[please underline the appropriate category or categories]</b>
<b>QUALIFICATIONS</b>	Please set out details of your qualifications in relation to each of the categories in respect of which you seek membership e.g. chartered arbitrator mediation qualifications
<b>EXPERIENCE</b>	Please set out brief details of your experience in relation to each of the categories in respect of which you seek membership, e.g. appointments as arbitrator, adjudicator, mediator etc. Parties need not be identified as confidentiality issues are likely to arise. It will be sufficient to describe the nature of the dispute and your involvement.
<b>DISCIPLINARY PROCEEDINGS</b>	Please insert details of any disciplinary proceedings taken or pending against you in your capacity as advocate, arbitrator, adjudicator, mediator or expert determiner by any administrative or regulatory body. If there are no such proceedings please underline the following:- <b>NO SUCH PROCEEDINGS</b>
<b>OTHER MATTERS</b>	Please insert such other information you think relevant to the Dean's consideration of your application e.g. appointment as tribunal chairman or part-time sheriff.

<b>MEMBERSHIP FEE</b>	If I am admitted to membership of the F.D.R.S. I authorise Faculty Services Ltd to deduct the sum of £50 from my above numbered account being the membership fee for a period of twelve months from the date my name first appears on the List of Members of the F.D.R.S. on the relevant Faculty web page.
<b>ACKNOWLEDGEMENT</b>	I acknowledge that membership is for a period of up to twelve months and that if I wish to remain a member, I must make an appropriate application to the Faculty Administrator, responsible for the administration of the F.D.R.S., using the form which will be sent to me in due course.
<b>DATE</b>	
<b>SIGNATURE</b>	