THEMIS

Application Form for Allyship with Themis to 31 September 2021.

APPLICANT'S DETAILS
(Please use capitals)

Name: .....

Email address: .....

Chambers/Academic Institution (if applicable): .....

Year of call (if applicable): .....

Predominant area of practice (actual/ intended): .....

DECLARATION

☐ I confirm that I have read and accept Themis' Mission and Values as set out at https://www.themiswomen.org/about.

PAYMENT

I hereby confirm that I have paid: £25 .....

Signed: ..... Date: .....

Please return this form to themis.women@gmail.com, stating in the email whether you have paid or requested a payment link (see below for details).

Themis is a non-profit organisation. The purpose of charging fees is to be able to provide events, activities and resources for our members and allies, and we have sought to fix them in an equitable fashion. They will be subject to review on an annual basis.

If you have a Paypal account, payment can be made to our Paypal account via the following link: paypal.me/themisiwba

Alternatively, if you don't have Paypal, please tick box below and we'll send a link to your preferred email address to permit payment that way.

☐ I don't have Paypal

Please email a payment link to the following address: _____

Thank you!