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| Icon  Description automatically generated | THEMIS  Application Form for Membership of 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

(Please tick as appropriate)

|  |  |
| --- | --- |
| \_\_\_ | I confirm that I have read and accept Themis’ Mission and Values (<https://www.themiswomen.org/about>). |
|  |  |

|  |  |
| --- | --- |
|  | I am a practising barrister |
|  | I am a pupil barrister |
|  | I am studying for the BPTC/BTT |
|  | I have secured a pupillage |
|  | I intend to apply for pupillage before 30 September 2022 |

|  |  |  |
| --- | --- | --- |
| I hereby confirm that I have paid: | £ | Category |
| (See next page for prices)  Signed: |  | Date: |

If you have a Paypal account, payment can be made to our Paypal account via the following link: [paypal.me/themisiwba](https://www.paypal.com/paypalme/my/profile). Alternatively, if you don’t have Paypal, you can request a link to make your payment. Please return this form to [themis.women@gmail.com](mailto:themis.women@gmail.com?subject=Membership%20Application), stating in the email whether you have paid or require a payment link.

PAYMENT

|  |  |
| --- | --- |
| Standard | £40 |
| ≤ 7 years post-tenancy; ≤ 3 years of returning to the Bar | £25 |
| Legal Aid practitioners\* and low- income practitioners\*\* | £25 |
| Pupils | £15 |
| Students/Pre-pupillage | £5 |
| Pay it forward\*\*\* | *Pay applicable fee* |

\* Those whose income in the preceding financial year was at least 50% derived from legal aid work

\*\* Those who earned below the national average income during the preceding financial year

\*\*\* Choose to pay an additional annual membership fee for someone else.

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.

Thank you!

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**Themis: The Intersectional Women Barristers’ Alliance**

**Equality and Diversity Monitoring Form**

Thank you for completing your application for membership of Themis! We would like to compile some data about our members and would be grateful if you could also complete this Equality and Diversity Monitoring Form (although it is entirely voluntary). On receipt, this form will be detached from and stored separately to your membership application form.

Please answer each question in turn by choosing one option only. If you do not wish to answer the question, please choose the option “*Prefer not to say*” rather than leaving the question blank. **If you have any comments about how any question is phrased or the options given for your response, please leave a comment to reflect this so that we can improve.**

**Age**

From the list of age bands below, please indicate the category that includes your current age:

|  |  |
| --- | --- |
| 16 – 24 years |  |
| 25 – 34 years |  |
| 35 – 44 years |  |
| 45 – 54 years |  |
| 55 – 64 years |  |
| 65 years or over |  |
| Prefer not to say |  |

**Location**

(a) Where did you grow up? (If you spent periods in various places, please identify the area where you spent the most time.)

(b) Where do you normally live today?

|  |  |  |
| --- | --- | --- |
|  | (a) | (b) |
| England |  |  |
| * London |  |  |
| * Birmingham |  |  |
| * Manchester |  |  |
| * Leeds |  |  |
| * Liverpool |  |  |
| * Other city (please specify) |  |  |
| * Other (please specify) |  |  |
| Wales |  |  |
| * Cardiff |  |  |
| * Other city (please specify) |  |  |
| * Other (please specify) |  |  |
| Scotland |  |  |
| * Edinburgh |  |  |
| * Glasgow |  |  |
| * Other city (please specify) |  |  |
| * Other (please specify) |  |  |
| Northern Ireland |  |  |
| * Belfast |  |  |
| * Other (please specify) |  |  |
| Outside the UK (please specify) |  |  |
| Prefer not to say |  |  |

**Gender Identity**

Is your gender identity the same as the sex that you were assigned at birth?

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| Prefer not to say |  |

**Sexual orientation**

How would you describe your sexual orientation?

|  |  |
| --- | --- |
|  | |
| Prefer not to say |  |

**Ethnic identity**

How would you describe your ethnic identity?

|  |  |
| --- | --- |
|  | |
| Prefer not to say |  |

**Religion or belief**

What is your religion or belief?

|  |  |
| --- | --- |
| No religion or belief |  |
| Agnostic |  |
| Atheist |  |
| Buddhist |  |
| Christian |  |
| Hindu |  |
| Jewish |  |
| Muslim |  |
| Sikh |  |
| Any other religion (please write in) |  |
| Prefer not to say |  |

**Socio-economic background and route to the Bar**

(a) During your schooling, were you ever eligible for free school meals?

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| Prefer not to say |  |

(b) Were you part of the first generation of your family to attend university?

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| Prefer not to say |  |

(c) Where did you complete your undergraduate degree, and what was it?

|  |  |
| --- | --- |
|  | |
| Prefer not to say |  |

(d) Where did you complete any post-graduate degree, and what was it?

|  |  |
| --- | --- |
|  | |
| Not applicable |  |
| Prefer not to say |  |

(e) Did you have a prior career (including full-time caring responsibilities) before coming/applying to the Bar and if so, what was it?

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| Prefer not to say |  |

**Disability**

The Equality Act 2010 generally defines a disabled person as someone who has a mental or physical impairment that has a substantial and long-term adverse effect on the person’s ability to carry out normal day-to-day activities.

(a) Do you consider yourself to have a disability according to this definition?

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| Prefer not to say |  |

(b) Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

|  |  |
| --- | --- |
| Yes, limited a lot |  |
| Yes, limited a little |  |
| No |  |
| Prefer not to say |  |

**Caring responsibilities**

(a) Are you a primary carer for a child or children under 18?

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| Prefer not to say |  |

(b) Do you look after, or give any help or support to family members, friends, neighbours or others because of either:

- Long-term physical or mental ill-health / disability

- Problems related to old age?

|  |  |
| --- | --- |
| No |  |
| Yes, 1 - 19 hours a week |  |
| Yes, 20 - 49 hours a week |  |
| Yes, 50 or more hours a week |  |
| Prefer not to say |  |

(Do not count anything you do as part of your paid employment)

**Themis**

(a) How did you find out about Themis?

|  |  |
| --- | --- |
| Instagram |  |
| Twitter |  |
| Facebook |  |
| LinkedIn |  |
| Other online source |  |
| Referral by an existing member |  |
| Other (please state where) |  |

(b) What do you hope to get from being a member of Themis?

|  |  |
| --- | --- |
|  | |
| Prefer not to say |  |

**Thank you for completing this questionnaire!**