



# BERMUDA BAR ASSOCIATION

## NEW MEMBER ACTIVATION, OR CHANGE IN DETAILS FORM

**NEW MEMBER**     **CHANGE IN DETAILS**

### CONTACT DETAILS:

**Title (Mr. Ms. Mrs. etc)**

**Full name:**

**Job title:**

**Company/Law firm name:**

**Company/Law firm address:**

**Main telephone #:**

**Direct line #:**

**Cell #:**

**\*Home #:**

**Work email:**

**\*Personal email:**

### BAR ADMISSION/REGISTRATION DETAILS:

**If applicable, place and date of first call to the Bar:**

**Date of Bermuda call to the Bar:**

**Bermuda Roll #:**

**If applicable, Registered Associate #:**

**Kindly scan and submit to the Bermuda Bar Office [bdabar@logic.bm](mailto:bdabar@logic.bm)**

**\*Items marked with an asterix symbol are optional.**

Office Location:  
2nd Floor, S. E. Pearman Building  
9 Par-La-Ville Road  
Hamilton HM 11  
Bermuda

Mailing Address:  
P.O. Box HM 125  
Hamilton HM AX  
Bermuda

Telephone & Fax  
Tel: 441-295-4540  
Fax: 441-295-9880  
Email: [bdabar@logic.bm](mailto:bdabar@logic.bm)  
Web: [www.bermudabar.org](http://www.bermudabar.org)