

CENTRAL ALBERTA COMMUNITY LEGAL CLINIC

#301, 5008 Ross Street

Phone: (403) 314-9129 Fax (403)314-9194

kathy@communitylegalclinic.net

www.communitylegalclinic.net

Volunteer Lawyer Registration

Name _____

Firm _____

Contact number(s) _____

Email _____ Fax: _____

Preferred method of contact _____

I am available for clinics on

- Tuesday 5-7pm
- Wednesday 5-7pm
- Thursday 1:30-3:30pm
- Other _____

We may be able to accommodate other days or blocks of time depending upon staff and volunteer receptionist availability.

Legal area(s) of practice:

- Administrative Law
- Bankruptcy and Creditor matters
- Criminal
- Employment Law
- Family Law
- Immigration Law
- Landlord and Tenant
- Personal Injury
- Other (specify) _____

- I would like to shadow with another volunteer lawyer

You will be contacted to confirm dates and times. You will receive notification of the clients booked for your appointments by 4:30pm the day before your clinic date to do a conflict check. If a conflict arises we appreciate notification as soon as possible so we can contact the client.

Please fax form to (403) 314-9194 Attn: Kathy