**HIGH COURT OF TRIPURA**

**Advocate Registration Form for CIS**

|  |  |  |
| --- | --- | --- |
| Name of Advocate | : | In capital letters |
| Gender: | : | Male | Female | Transgender | Date of Birth: |  |  | - |  |  | - |  |  |  |  |
| Mobile No. 1. | : |  | Mobile No. 2. |  |
| Phone No.(office) | : |  | Phone (Res) |  |
| Email ID (*mandatory*) | : |  |
| \*Advocate Code ***(to be specified by the CIS Admin.)*** | : |  |  |  |
| Bar Reg. No. | : |  | Reg. Date |  |  | - |  |  | - |  |  |  |  |
| Address | : |  |
|  |
| City : |  | STATE: |  |
| State | : |  | PIN Code |  |
| CIS Code*(****to be specified by the CIS Admin.)*** | : |  |  |  |

Signature of the Advocate *to be verified by*

 *Secretary, High Court Bar Association*

Date : \_\_\_\_\_/\_\_\_\_\_/2022. *High Court of Tripura*

 *Signature with date*