



THE CANADIAN
BAR ASSOCIATION
British Columbia Branch

CBABC DIRECTORY UPDATE FORM

ATTN: CBABC Directory Department
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Email: data@bccba.org

Name: _____
Title: _____
Company: _____
Address: _____
Phone: _____
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BC Year of Call:

Called to Other Bars:
(Year) (Place)

Other Fluent Languages
(Must be Written and Spoken):

Please indicate if the contact information above is:

Business or Home (Home listings will not be published without your signature below)

Practice Status:

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The information provided in the listing above is:

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 OK with noted changes

Signature (must be listed Individual's signature)

Date