

ASSOCIATE APPLICATION FORM

Organization Name: Fasken

Representative's Name and Title: Koker Christensen, Partner

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Parent Company:

Description & Fees:

I. Associate ☒ \$5000

Organizations that are business partners of CAFII members or otherwise support the Association's goals are eligible to apply for Associate status. Associates receive periodic CAFII communications and invitations to CAFII events. Associates pay \$5000 per annum in one instalment.

Associate Status is valid from January 1 to December 31 each year.



Signature of Applicant:

Date: February 28, 2024

As a signing authority, I hereby acknowledge that as an applicant for Associate status in CAFII, my organization supports the Association's mission, objectives, and policy positions. For more information visit www.cafii.com.