



AUTHORITY FOR AN ADVOCATE TO REPRESENT

I _____ of _____
(client's name) *(client's address)*

give authority to _____,
(name of person authorised) *(relationship to client eg. friend/brother/sister etc.)*

of _____
(organisation of support: if appropriate)

to _____
(type of authority eg. talk with the Committee on my behalf / receive copies of all correspondence etc.)

contact details of Advocate: _____

Signed: _____ Date: _____
(client's signature)