



**INTELLIJUS LAW SOCIETY  
MEMBERSHIP FORM  
STUDENT MEMBERSHIP**

**PERSONAL DETAILS**

NAME	
SURNAME	
STUDENT NUMBER	
FACULTY	
COURSE OF STUDY	
YEAR OF STUDY	
CONTACT NUMBER	
EMAIL ADDRESS	

**MEMBERSHIP CATEGORIES**

- 1. Ordinary Member ☐
- 2. Executive Member ☐

**TERMS AND CONDITIONS**

I \_\_\_\_\_, confirm that I am a Student at \_\_\_\_\_. I agree to abide by the rules and regulations of the IntelliJus Law Society. I understand that membership benefits and privileges are subject to change.

**SIGNATURE**

**DATE**

**PAYMENT DETAILS**

- Membership fee (R20)
- Payment Method (Cash or Bank Transfer)
- Absa Bank Account- 9396392213

**CONTACT INFORMATION**

Email: [intellijuslawsociety@gmail.com](mailto:intellijuslawsociety@gmail.com)

Website:

X: @intellijus

Instagram: intellijus.za

Contact No: 072 973 9186/ 068 305 144