

REQUEST TO CANCEL SOCIETY MEMBERSHIP

PLEASE COMPLETE THE INSTRUCTIONS BELOW:

1. The student completes sections A, B + C of this form
 2. The student obtains the recommendation of the relevant Student Development Office or Manager (section D)
 3. The student submits the form to the cashier to cancel membership
- SECTION A. Request:** (please mention the membership account number)

SECTION B. Reason why you are cancelling

SECTION C. Student detail (Complete your details)

Initials		Surname	
Student nr		Degree/diploma	
Date		Signature	

SECTION D.

Recommendation	Cancel: <input style="width: 40px; height: 20px;" type="checkbox"/>	Do not cancel: <input style="width: 40px; height: 20px;" type="checkbox"/>	
Signature: Student Development Officer/ Manager			
Date :			