



**UNIVERSITY OF TURBAT
DIRECTORATE OF STUDENT AFFAIRS**

Membership Form of Society/ Club

Name of the Society/ Club: _____

Name of Student: _____

Department: _____

Student Registration No: _____

CNIC No: _____

Academic Session: _____

Semester: _____

Contact Number: _____

Email Address: _____

Interest and Experience: Please briefly describe your interest in the chosen society (s)/ club (s) and any relevant experience or skills you bring to the society/ club:

Applied for Society/ Club Position: _____

Student Declaration: I hereby acknowledge that the information provided above is accurate and complete to the best of my knowledge. I understand that any false information may result in the termination of my membership. I commit to actively participate in the events and activities organized by the society/ club. I agree to adhere to the rules and regulations set forth by the society and uphold the principles of respect, collaboration, and inclusivity within the university community.

Signature: _____

Date: _____

For Office Use Only

Recommendation: _____

Focal Person of Club/ Society

Remarks: _____

Director Students Affairs