



# SK AND JP LEGAL SOLUTIONS

## Membership Form

Reg no: 2011/069110/23  
Posbus/P.O Box 11195  
Tramshed  
0126

Tel: (012) 001 0087/0713601711  
Email: info@skjplegal.co.za  
Address: 56 Dorfling Street  
The Orchards  
Pretoria  
0182

### PROFESSIONAL LEGAL COVER

*SK & JP Legal Solutions protect you in the following manners:*

- In all your legal problems between you or your employer (Labour matters).
- Case against someone who has damaged or destroyed your property.
- When you enter into contracts buying a property of any kind.
- Problems with furniture shops and other supplier of goods.
- When you are involved in a car accident, we help you claims the damages from the person in the wrong.
- Case against someone who refuses to pay your money back.
- Arrest for criminal cases.
- SK & JP Legal Solutions helps you in all legal problems which may results from your use of, or driving your car.
- Civil cases.
- Housing related problems.
- Credit clearance.
- Wills and Administration of estates.
- Maintenance matters.
- Divorce cases.
- Administration orders.

**FROM ONLY R100.00 PER MONTH AND ALL YOUR FAMILNY MEMBERS ARE COVERED.  
FOR MORE INFORMATION CONTACTS: 071 360 1711 / 083 235 0251**

### ***HOW TO LODGE A CLAIM***

- Contact our offices, either personally or telephonically.
- Our team of experienced Legal Advisors will listen to your problems and offer prompt legal solutions.

### ***YOU'RE GUARANTEE***

- We guarantee that with money you will be given the necessary legal protection at all times.
- We furthermore assure you that your problems will be our problems.
- We protect you everywhere within South African borders.

### ***YOUR QUICK PROTECTION***

- We will start to represent you in court after 3 months of membership and you are entitled to free legal advice immediately after receiving your first payment.

### ***WE WILL GIVE YOU THE FOLLOWING***

- A lawyer to represent you wherever you are.
- Protection -24 hours a day.

### ***SK & JP LEGAL SOLUTIONS PACKAGE***

- Legal cover: R100.00 per month

### ***IMPORTANT NOTICE***

You are kindly requested not to pay SK & JP LEGAL SOLUTIONS employees.

The money should be paid into SK & JP LEGAL SOLUTIONS accounts as per details listed below.

### **BANKING DETAILS**

**ACCOUNT NAME:** SK & JP LEGAL SOLUTIONS

**BANK NAME:** NEDBANK

**ACCOUNT NUMBER:** 1138694290

**BRANCH CODE:** 16044500

**TYPE:** Business PAYU

***(PLEASE QOUTE YOUR REFERENCE NUMBER)***

**MEMBERSHIP APPLICATION FORM**

PERSONAL DETAILS

MEMBERSHIP NO: \_\_\_\_\_

SURNAME: \_\_\_\_\_ INITIALS \_\_\_\_\_

I.D NO: \_\_\_\_\_

FIRST NAMES IN FULL: \_\_\_\_\_

TITTLE: \_\_\_\_\_ GENDER (M/F) \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_

**LANGUAGE PREFERRED**

ZULU	ENGLISH	TSHWANA	AFRIKAANS	NSOTHO	NDEBELE
XHOSA	TSONGA	N-SOTHO	VENDA	SWATI	

**CONTACT NUMBER**

HOME \_\_\_\_\_ WORK \_\_\_\_\_

FAX: \_\_\_\_\_ CELL \_\_\_\_\_

E-MAIL \_\_\_\_\_

FULL HOME ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

FULL POSTAL ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SPOUSE DETAILS**

FULL NAMES: \_\_\_\_\_

ID NO: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

**CHILDREN'S DETAIL**

	FULL NAMES	DATE OF BIRTH	GENDER (M/F)
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

**PAYMENT METHODS**

*Please tick the box of your preferred payment method.*

- CASH
- DEBIT ORDER
- SALARY STOP ORDER

***EMPLOYMENT DETAILS***

EMPLOYER: \_\_\_\_\_

EMPLOYER NO: \_\_\_\_\_

ADDRESS OF EMPLOYER: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ CODE \_\_\_\_\_

INDUSTRY: \_\_\_\_\_ SALARY DATE: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

**BANKING DETAILS**

ACCOUNT HOLDER'S NAME: \_\_\_\_\_

NAME OF BANK: \_\_\_\_\_

BRANCH NAME: \_\_\_\_\_ CODE: \_\_\_\_\_

ACCOUNT NO: \_\_\_\_\_

ACCOUNT TYPE: SAVING \_\_\_\_\_ CHEQUE \_\_\_\_\_

DEDUCTION DATE: \_\_\_\_\_ AMOUNT: \_\_\_\_\_

SIGNED AT: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF AUTHORISED PERSON: \_\_\_\_\_

**AUTHORISATION TO BANK-** I/we request and authorize you or your authorized agent to draw against my/our account with the above mentioned bank (or any bank/branch to which i/we may transfer my/our account) the amount necessary for payment of the monthly premium due in respect of the above mentioned products/services. All such withdrawals from my/our account shall be treated by you as though they had been signed by me/us personally. I/we agree to pay the bank charges in connection with these instructions and the cost thereof in accordance with the South African Clearing Bank's Tariff in force at the time. I/we understand that:

1. The withdrawals hereby authorized will be processed by computer.
2. Details of each withdrawal will be reflected on my/our bank statement of the accompanying voucher, and
3. The obligation to ensure that my/our monthly premiums are received by you remains with me/us despite granting you of this debit order authority. i/we undertake to satisfy myself/ourselves from the time that the amount necessary for payment of the monthly premium due in respect of the above mentioned product/services are duly withdrawal by you in terms of this debit order authority, and i/we record that your acceptance of this debit order authority in no way places any onus on you to ensure that the monthly withdrawal of the amount referred to herein are made. This authority shall continue in full force and effect until cancelled by me/us by giving you 30 days' written notice thereof, sent to you by prepared registered post. But i/we shall not to any refund of any amount which you have withdrawn while this authority was in the force unless i/we can prove that any such amounts were not legally owned to you, Receipt of this instruction by you.

Client's signature ----- DATE -----