

**UP CHAPTER OF ANATOMICAL SOCIETY OF INDIA
APPLICATION FOR MEMBERSHIP**

To,
The General Secretary cum Treasurer
UP Chapter of Anatomical Society of India

Membership
No.....

I desire to enlist myself as an **Ordinary / Life Member** of UP Chapter of Anatomical Society of India for/from the year I agree to abide by all the Rules and Regulations of the Society as given in its Constitution and as passed in its General Body Meetings from time to time. I am enclosing **Cash / Bank Draft/NEFT/Net banking**, No..... dated on (Name of Bank) in favor of the **Treasurer, UP Chapter of Anatomical Society of India**, payable at **Meerut** for Rs..... towards the admission fees and the subscription for the year.

NAME IN FULL (in block letters)

First name Middle name Surname

QUALIFICATIONS WITH YEARS: (1) (2) (3)

PRESENT DESIGNATION/NAME OF THE DEPARTMENT/POSTAL ADDRESS OF THE INSTITUTION:

.....
.....

COMPLETE POSTAL ADDRESS (residential) with PIN CODE and STATE:

.....
.....

Signature of Candidate

(For TREASURER's office record)

Membership

No.....

NAME of the MEMBER with COMPLETE POSTAL ADDRESS, PIN CODE and STATE :

.....
.....

Details of the CASH / BANK DRAFT in favor of the THREASURER,UP Chapter of Anatomical Society of India.

Bank Draft No..... Dated

Name of the Bank for Rs.....

Payable at Meerut.

Signature of TREASURER of the
UP Chapter of Anatomical Society of India

(For EDITOR's office record)

Please send the JOURNAL at the following address

Membership

No.....

NAME of the MEMBER with COMPLETE POSTAL ADDRESS, PIN CODE and STATE :

.....
.....

Signature of TREASURER of the
UP Chapter of Anatomical Society of India

BIODATA PROFORMA

(Kindly furnish the following information for the Membership Directory)

Date of Birth :

Academic Qualification :

Sl. No.	Qualification	Year	College / Institution / Academic Body	University
	MBBS			
	MSc			
	MS / MD			
	DNB			
	PhD			
	DSc			

Year / Date of joining Anatomy Department as (Designation)
.....

Year / Date of joining the UP Chapter of ASI as : Ordinary Member Membership No.
.....

Life Member

OFFICE

**PRESENT
RESIDENCE**

**PERMANENT
RESIDENCE**

Address:

Phone:

Fax: Mobile No..... E-mail
.....

National / International Awards:

Field of Research:

Participation in International Conferences etc.

Any other special information :

(Membership from 1st January to 31st December each year)

- | | | |
|----|---------------------------------------|--|
| 1. | Enrollment Fee | Rs.50 |
| 2. | Ordinary Member (Annual subscription) | Rs. 450 |
| 3. | Couple Members | Rs. 900 +100 (two enrollment fees) = 1000 |
| 4. | Life Member (all the categories) | Rs. 4500 (Life membership) + Rs. 450 (Ordinary Membership of current year) + Rs. 50 (enrollment Fees for the current year). = Rs. 5000 |
| 5. | Associate – Membership | Rs. 100 |
| 6. | Student – Membership | Rs. 50 |
| 7. | Journal subscription | |
| | - Individual | Rs. 1000 (Per Annum) |
| | - Institutional | Rs. 2000 (Per Annum) |

Please post or mail this form along with the Bank Draft/NEFT/net banking-up chapter of anatomical society of india, Indian Bank Tejgarhi branch, Meerut, a/c-50012371980, IFSC-IDIB000T533

Dr. Kuldeep Singh

Secretary cum Treasurer of UP Chapter of Anatomical Society of India

D-109, Shastri Nagar, Meerut, Pin -250004

Phone: 9720052244, 9149088972, email-dr_kuldeep68@yahoo.com