

INDIAN SOCIETY FOR THE STUDY OF PAIN
INDIAN CHAPTER OF INTERNATIONAL ASSOCIATION FOR THE STUDY OF PAIN
Reg. No.: U.P./470/84-85
LIFE MEMBERSHIP FORM

Full Name: Dr / Mr / Mrs.....
(in block letters) (Surname) (Name) (Middle Name)

Sex: Male / Female.....Age: Years, Date of Birth Blood group:

Qualification (University & year of passing).....

Specialization: Registration No.:.....

Designation:

Special Interest in field of pain : Pain Relief.....

Permanent Address:

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Pin..... State..... phone.....

E-mail ID:..... Mobile No:.....

I agree to abide by the rules & regulation of Indian Society for The Study of Pain.

I wish to join INDIAN SOCIETY FOR THE STUDY OF PAIN as life member / Associate Member and enclose Cheque / D.D

No. drawn on Date..... Bank

(Drawn in favor of Indian Society for Study of pain) towards subscription for the life Membership.

Date

Signature of Applicant

1. Sponsor's Singnature ISSP LM No.....
Name

2. Sponsor's Singnature ISSP LM No.....

Name.....

- ✓ **Life Membership Fees:** Within india Rs. 6018 /- (including 18% GST & Rs 100 for Id Card)
Outside India US\$ 250/-
- ✓ **Associate Membership Fees:** Within india Rs. 4130 /- (incl. 18% GST & Rs 100 for Id Card)
Outside India US\$ 150/-
- ✓ P.S. Outsttion Cheque Should be accompanied by Rs. 100/- extra as bank charges.
- ✓ Send two passport size photographs for I card.
- ✓ Cheque / DD in favour of “**Indian Society for The Study of pain**” payable at new Delhi

Bank Details

A/c No. : 90682010114209

Holder Name : Indian Society for The Study of pain

IFCS Code : SYNB0009109

Bank : Syndicate Bank

Branch : Dwarka, sector 12, New Delhi

Form to be sent to.

Dr. Pankaj N Surange, Hon Secretary, Indian Society for The Study of pain. IPSC India, plot No-147, Palam Exten. Ramphal Chowk, Sector- 7, Dwarka, New Delhi, 110075

Email: issphq@gmail.com Mob:+91-9599495514

For Office Use: Receipt No & year LM No.....ALM No..... LF No.....

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