

# ANATOMICAL SOCIETY OF INDIA

(Regd. No 704/2010-2011)

## APPLICATION FOR MEMBERSHIP

[Incomplete Application Form will not be accepted]

To,  
**The General Secretary**  
 Anatomical Society of India,  
 .....

**Membership No.....**

**Dated.....**

I desire to enroll myself as an **Ordinary/Couple / Life Member** of the Anatomical Society of India for/ from the year .....I agree to abide by the Constitution, Rules and Regulations of the Society and any other provision made in its General Body Meetings from time to time. I will pay by **Cash / NEFT / Bank Draft / Multicity cheque** in favour of the **Treasurer, Anatomical Society of India** payable at **Lucknow**, towards membership fees and any other charges.

NAME IN FULL (INBLOCKLETTERS)	First	Middle	Surname
FATHER / HUSBAND'S NAME	First	Middle	Surname
QUALIFICATIONS WITH YEARS	<b>1.</b>	<b>2</b>	
	<b>3</b>	<b>4</b>	.
	<b>5.</b>	<b>6</b>	
PRESENT/ IMMEDIATE PAST DESIGNATION			
NAME OF DEPARTMENT & INSTITUTION			
COMPLETE POSTAL ADDRESS FOR CORRESPONDANCE (inform whenever changed)			
	CITY	PIN	STATE
COMPLETE POSTAL ADDRESS (RESIDENTIAL)			
	CITY	PIN	STATE
E MAIL ID			
OFFICE TEL. NO.			
RESI. TEL. NO.			
MOBILE NO.			
<b>PROPOSED BY</b>			
	(Signature, Name and Address of the valid member of the ASI)		
<b>SECONDED BY</b>			
	(Signature, Name and Address of the valid member of the ASI)		

Signature

Signature

Signature

TREASURER

GEN. SECRETARY

APPLICANT

Dated.....

(For EDITOR's Office)

MembershipNo \_\_\_\_\_

Please send the JOURNAL at the following address

NAME OF MEMBER (in Block Letters)	First	Middle	Surname
COMPLETE POSTAL ADDRESS FOR SENDING JOURNAL			
	CITY	PIN	STATE
E MAIL ID:			
OFFICE TEL.NO.			
RESI.TEL.NO.			
MOBILE NO.			
DATED.....			
Signatureofthe APPLICANT			

(For TREASURER's Office)

MembershipNo \_\_\_\_\_

NAME of MEMBER (in Block Letters)	First	Middle	Surname
COMPLETE POSTAL ADDRESS FOR CORRESPONDENCE (Inform whenever changed)			
	CITY	PIN	STATE
E MAIL ID:			
OFFICE TEL. NO.:			
RESI.TEL.NO.:			
MOBILE NO.:			
PAYMENT DETAILS "TREASURER, ANATOIMICAL SOCIETY OF INDIA", Payable at LUCKNOW			
Bank Draft / Multicity Cheque / NEFT (attach copy of receipt)	No.	Dated	Amount
Bank	Name	Branch	
Name of the Bank			
For Rupees			
Signatureofthe APPLICANT			

**BIODATA PROFORMA***(Kindly furnish the following information for the Membership Directory)*

<b>NAME IN FULL</b> (IN BLOCK LETTERS)	:	First	Middle	Surname
<b>Date of Birth &amp; Age:</b>	:			

**Academic Qualifications:**

Sl. No.	Qualifications	Subject	Year	College/Institution/ Academic Body	University
	MBBS				
	MSc				
	MD/MS				
	DNB				
	PhD				
	DSc				
	Any other				
National / International Awards					
Field of Research:					
Participation in Conferences etc.		State: National: International:			
Any other Special Information:					
Year/Date of joining Anatomy Department		Designation: Name of Institution:			
Year/Date of joining the ASI		Ordinary Member Membership No.:		Life Member:	
Official Address					
Present Address					
Permanent Address					

Signature of the APPLICANT

## HOW MUCH TO PAY

<b>Ordinary Membership:</b> (from 1 January to 31 December each year)		INR	USD
	Enrolment fee	200	20
	Membership fee	1500	100
	<b>Total</b>	<b>1700</b>	<b>120</b>
<b>Couple Membership:</b> (from 1 January to 31 December each year)			
	Enrolment fee (Two)	400	
	Membership fee	2250	
	<b>Total</b>	<b>2650</b>	
<b>Life Membership:</b> (one time)			
	Enrolment fee	200	40
	Ordinary Membership fee (of current year)	1500	100
	Life membership fee	8000	900
	Constitution Booklet of ASI	100	10
	<b>Total</b>	<b>9800</b>	<b>1050</b>
<b>Associate Membership</b>	For each Annual Conference	<b>300</b>	<b>30</b>
<b>U.G. Student Membership</b>		50 (Presently suspended)	
<b>BANK COLLECTION:</b>	Add for inward bank charges in India	<b>USD 10</b>	

**BANK DETAILS....FOR NEFT PAYMENT:** (Attach copy of receipt of payment with this form)

BANK	: ALLAHABAD BANK,
Branch	: KGMC. LUCKNOW-226 003 UP
Account Name	: Treasurer, Anatomical Society of India
S/B a/c No.	: 20229838126
BRANCH Code	: 211028
IFSC Code	: ALLA0211028
MICR Code	: 226010013
SWIFT Code	: ALLAINBBLUK

### **INCOMPLETE FORM WILL NOT BE ACCEPTED**

**Please post this form along with the Bank Draft / Multicity Cheque / Receipt of NEET at the following address:-**

**Prof. Punita Manik,**  
Treasurer ASI,  
Department of Anatomy,  
King George's Medical University,  
Luknow-226 003 UP India

Phone: 91+9839223622

E-MAIL: [treasurerasi@yahoo.com](mailto:treasurerasi@yahoo.com)