

## SOCIETY OF NEUROSURGEONS **GUJARAT**

Reg No. F/20041/Ahmedabad; Reg. Date: 28/02/2018

## **Membership Form**

Photo

Title :	Surname :	First Name :		Middle Name :	
Age :	Date of Birth :	Gender : Male	Female		
Address :					
City:		Pin Code :		Phone :	
Mobile :		Email :			
Whats App	/ sms Permission :	Yes no			
Other Membership					
NSI Numbe	er:	NSSI Number :		GSA Number :	
Qualifications :		GMC / IMC Regis	tration Number :		
Indemity Scheme :					
<u></u>					
	Membership Detail		Membership Fees	<b>Payment Details:</b> The Payment by DD or Cheque should be in favour of	
	Life time Membership		5000/-	"SOCIETY OF NEUROSURGEONS"  Payable at Ahmedabad.	
Associa	te Membership (Valid for Max. years fr	om date of Approval)	3000/-	Please write your name and mobile number behind Cheque / DD	
Name of Account: Society Of Neurosurgeons			• Name of Ban	• Name of Bank : HDFC Bank (Vejalpur)	
Account	: <b>No.</b> : 501002351012	51	• IFSC Code	: HDFC0000048	
Proposed By:			Seconded By :		
Name :			Name:		
Phone :Email :				Phone :Email :	
SON Membership No :			and the second s	5 (24/9)-(24/9)-(24/9)	
Signature :			Signature :		
Approved By: Approval Date:  Name:  Designation: President / Secretary / Treasurer  Phone:  Email:  SON Membership No:  Signature:			All fields in form are mandatory     A full time worker in Neurosurgery can apply for direct enrollment as a full Member of the society. But the membership will be granted only during the annual meeting. Membership		
Signature.			Discontinuations of the membership is solely the right of		

## Requirement for membership:

- 1 photo copy of registration number of Medical Council.
- 1 photo copy of M.S. / Mch
- 1 photo copy of Date of Birth proof.

- governing body Send Membership form to below mentioned Address.

## **Society of Neurosurgeons**

106, Anilkunj Center, Nr. Shefali Center, Paldi Cross Road, Paldi, Ahmedabad 380006. Tel: +(91)-79-26577200

Web: www.society of neurosurgeons.com ~ E.: society of neurosurgeons@gmail.com