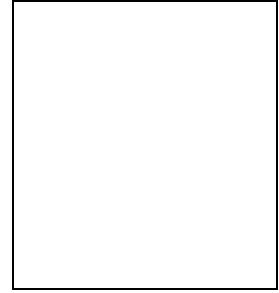




Indian Society for Assisted Reproduction

Flat No.23-A, 2nd Floor, Elco Arcade, Hill Road,
Bandra (W), Mumbai – 400050.
Tel : 26456488 , 26406070
Email : isar.office@gmail.com



Application for Life Membership

Name in full _____
(In Block Letters with Surname Underlined)

Degrees / Qualifications _____

Designation _____

Office Address _____

Telephone _____ Fax _____ Email _____ Pin Code _____

Mobile _____

Residence Address _____

Telephone _____ Fax _____ Email _____ Pin Code _____

Training in Assisted Reproductive Technology

- 1) _____
- 2) _____
- 3) _____

Experience in Assisted Reproductive Technology

- 1) _____
- 2) _____
- 3) _____

Interest in Assisted Reproductive Technology _____

Clinical _____

Laboratory _____

Desire and ability to train others _____

Willing to supply complete Data for National Registry on Assisted Reproduction _____

Others (Specify) _____

Proposed by **(Recommended by Member of ISAR)** **(Signature)**

Seconded by **(Recommended by Member of ISAR)** **(Signature)**

Entrance Fee Rs.500 + Membership Fee Rs.10,000/- by Cheque / D.D. / No.

on Bank _____ Branch _____ in favour of **Indian Society for Assisted Reproduction**

and payable at Mumbai is enclosed along with 2 recent photographs of size 5cm x 6cm.

and add Rs.30/- more for outstation cheque .

Date _____

Signature _____

(For Office Use)

Application Received on _____ Receipt No. _____ Admitted at the

Executive Committee Meeting on _____ Membership No. _____