



FORM FOR APPLICATION FOR e-MEMBERSHIP OF  
INDIAN CHEST SOCIETY FOR FOREIGN NATIONAL  
(Registered under the Societies Registration Act. 1860)

Name :

Address :

Country :

Email :

Tel. No :

Fax No. :

Age :

Mobile #

Qualification :

Appointment :

Proposed by :

Secretary's note :

If my application is accepted I am agreeable to the rules and regulations of the society.

Date :

Signature of the Candidate

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**The DD/Cash/Cheque (amount €45.00) should be made out in favour of 'Indian Chest Society' payable at Varanasi, India. Payment by credit card will not be accepted.**

**Eligibility criteria for Life Membership:**

- A doctor who is an Physician working and practicing in Pulmonary Medicine.

**Eligibility criteria for Associate Membership:**

Associate members can neither vote nor stand for elections to the Governing Body

- PG Students/Research Scholars working in Pulmonary Medicine.

Headquarter of the society  
C/o Dr. J. K. Samaria, Hon. Secretary,  
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