



FORM FOR APPLICATION FOR MEMBERSHIP OF  
INDIAN CHEST SOCIETY

(Registered under the Societies Registration Act. 1860)

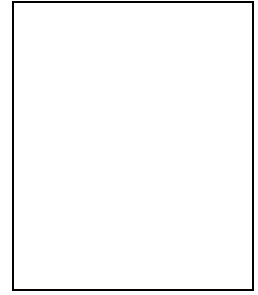
**Headquarter of the society**

**C/o Dr. J. K. Samaria, Hon. Secretary,**

Plot No. 36-A, Kabirnagar Colony, Durgakund, Varanasi-221005. INDIA

e-mail: samariajk@gmail.com, Tel: 0542-2310333, Fax: 0542-2310333

Mobile: 9336911295, website: indianchestociety.in



Name of the Candidate:

Address :

Pin Code

Email :

Tel. No :

Mobile:

Fax No. :

Date of Birth :

Qualification :

(State the Branch,

Year of Post – Graduate Qualification)

Appointment :

Type of membership : Life

(Tick one)

Associate

Proposed by :

Seconded by :

Secretary's note :

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

Date :

Signature of the Candidate

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**The DD/cheque (amount Rs. 8,000/-) should be made out in favour of Indian Chest Society payable at Varanasi. For out station cheque add Rs. 100/- towards bank charges.**

**Eligibility criteria for Life Membership:**

- A doctor who is an MD in Respiratory Medicine, from any University.
- A doctor who is an MD in General Medicine, but is attached to any hospital as a Pulmonary Physician.
- Diploma holders in Respiratory Medicine or DNB in respiratory Medicine.

**Eligibility criteria for Associate Membership:**

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

- PG Students can become Associate members by submitting a certification from their Head of Department stating that they have been registered for an MD in Respiratory Medicine. Upon submission to the ICS, of their MD certificate, their membership will be converted to the Life Membership category.
- Any other physician holding an MD or diploma may also become an Associate Member of the Society.