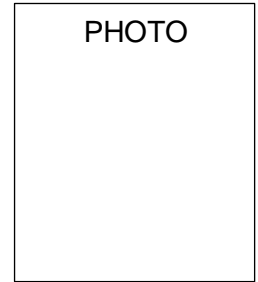


NEUROTRAUMA SOCIETY OF INDIA

LIFE MEMBERSHIP FORM

PHOTO



PERSONAL DETAILS

FIRST NAME: _____

MIDDLE: _____

LAST NAME: _____

DESIGNATION and WORK PLACE: _____

EMAIL ID: _____

CONTACT NO: _____

LANDLINE +91 CITY CODE NUMBER: _____

ADDRESS FOR CORRESPONDENCE

LINE1: _____

LINE 2: _____

CITY: _____ STATE: _____

PINCODE: _____ COUNTRY: _____

QUALIFICATION (ATTACH CERTIFICATE)

TICK: (MBBS/ MS/ MD/ MCH/ DM)

PAYMENT BY BANK TRANSFER TO:

AXIS BANK	IFSC CODE: UTIB0000055 MICR CODE: BRANCH CODE: 055 A/C NAME: NEUROTRAUMA SOCIETY OF INDIA A/C NO: 920020045274395	BRANCH ADDRESS: C-58, GF, PREET VIHAR, MAIN VIKAS MARG, DELHI-110092
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TRANSACTION ID:

All documents should be submitted electronically to

Secretaryntsi1@gmail.com

- **Colour photograph in jpeg format.**
- **Curriculum vitae.**
- **Scanned copy of qualification certificates.**
- **Scanned copy of signed membership application.**

SIGNATURE

OFFICE USE:

RECEIPT NUMBER: _____

AMOUNT: _____ DATE: _____

PRESENTED TO EC ON: _____

MEMBERSHIP CONFIRMED/ REJECTED ON: _____

LIFE MEMBER

ELIGIBILITY: All medical professionals with post-graduate degrees with an interest in and working in the field of Neurotrauma are eligible to become life members.

PROCEDURE FOR APPLICATION: Application for life membership should be made to the secretary, NTSI, and the executive committee shall be the authority to admit a member.

ADMISSION FEES: Rs 4000/- (Rs 1000 admission and one-time fees of Rs 3000).

Fees for conversion to Life Member from Associate Member: Rs.2,500 (Rs. 500 joining fee and Rs. 2,000 life membership fee)

