

INDIAN SOCIETY FOR ATHEROSCLEROSIS RESEARCH

APPLICATION FORM FOR MEMBERSHIP					
Name: Dr. /Mr./Mrs.:-					PHOTO
	First Name	Middle Nam	ne	Surname	
Designation & Affiliation:-					
Home Address:-					
Mobile No. :-		E-m	nail :-		
Academic Qualifications:-					
Type of Membership Applied for: - NRI Life Membership					
			Applic Date:	cant's Signature [
CASH / CHEQUE/ DEMAND DRAFT/ ONLINE TR. of Rs					
NRI Life member of ISAR &	Rs. 10,000 IAS Rs.3000			+ State Chapter of for members be	Rs. 3500 fore Sept Rs.1500
(Note: DD/ Cheque should be made in name of "Indian Society for Atherosclerosis Research" payable at Delhi). For online transfer: Indian Society for Atherosclerosis Research; Account no.3009101059892; IFSC Code:CNRB0003009; UCMS AND GTB BRANCH, DELHI. Send the complete application with DD/ Cheque/ Online transfer details by post to:					
Prof. Amitesh Aggarwa	al				
Secretary, ISAR					
D 72, Sector 20, Noida, UP 201301					
Mobile :- 9811060025					
E-Mail :- <u>isarsecretary</u>	@gmail.com				
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Date of Receipt of App	plication		Date	of Approval	
Membership Number			Signa	ature Secretary	