

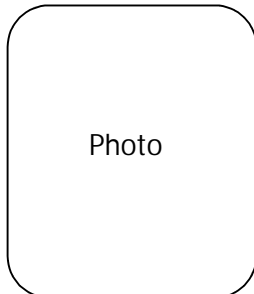


Indian Virological Society

OFFICE: F-1, NATIONAL SOCIETIES BLOCK, NASC COMPLEX,,
DEV PRAKESH SHASTRI MARG, NEW DELHI 110 012 (INDIA)
TEL: 9711763384; E-mail: secretaryivs@gmail.com
Website: www.ivsnet.in

Application for Membership

To
The Secretary
Indian Virological Society
F-1, National Societies Block
NASC Complex, Pusa
DPS Marg, New Delhi-110 012
India



From (Print your details)

Title (Mr / Mrs / Ms / Dr / Prof): _____

Name: _____

Degrees: _____

Designation: _____

Full Address: _____

E-mail: _____

Telephone: _____

Fax: _____

Mobile phone: _____

Primary Research Area: _____

I wish to enroll as annual / life / patron member of the Indian Virological Society. I will abide by the rules and regulations of the Society as in force from time to time. I enclosed prescribed membership fee payable to Indian Virological Society at New Delhi as detailed below:

Currency (Rs / US\$):

Amount (in figures and words):

Payment type: cash / demand draft / cheque (No. and date):

Bank details:

Signature: _____

Date: _____

Note: Members contact information and research interests will be placed in the IVS database. Tick in the box if you do not like your details to be in database

For the use of Indian Virological Society Office Only

Proposed by: _____
Name Signature Date

Seconded by: _____
Name Signature Date

Individual Membership Fee:

	Regular Member	Student member	Regular Member	Student member
Annual Membership	Rs. 2500	Rs. 1000	US \$ 100	US \$ 50
Life membership	Rs. 6500	-	US \$ 200	-

Note: 1. Payment in cash or by demand draft drawn in favor of Indian Virological Society at New Delhi,
2. A admission fee of Rs. 100.00 should be added for a new member.

New Delhi, dated _____

Membership No. _____

Received Rs./US\$ (in figures and words): _____

Treasurer

Secretary