INDIAN NATIONAL ASSOCIATION FOR STUDY OF THE LIVER

Application for Membership

I, ……., wish to enroll as life member of
(First, Middle, Surname)
Indian National Association for Study of the Liver (INASL).

(Signature)

Address for correspondence:

Email: ……. Tel & Cell No: ……...

Date of birth: ----------[dd/mm/yyyy]

Academic Qualifications:

Degree/Diploma Year University / Institution

Application sponsors (two life members): (Name, Address and Signature)

i) ----------

ii) ----------

Hobbies and Pastimes----------

Family Details ----------

Area of Interest ----------

I enclose: -

i- A copy of my CV, highlighting publications and other contributions in Hepatology.

ii - Crossed Cheque / Bank draft for Rs. 5050/-in favour of "Indian National Association for Study of the Liver" (Add Rs. 50/- for outstation charges)

iii – Recent passport size color photograph.

Form received on: Approved by:

Treasurer Secretary President

Date:

Life Membership No. Accepted on

Filled in Application with enclosures should be sent by Speedpost to:

Prof. S.P. Singh,
Digestive Diseases Centre, Beam Diagnostics: Ist Floor,
Bajrakabati Road, Shanti Nagar [Mali Sahi], Cuttack 753001, Orissa, India.
Tel: +91-671-2323624; Cell: +91 9437578857. Fax +91-671-2416913 [Attn: Dr. S.P. Singh]
E-mail: inasl.secy@gmail.com spsingh.cuttack@gmail.com scb_gastro_dept@hotmail.com