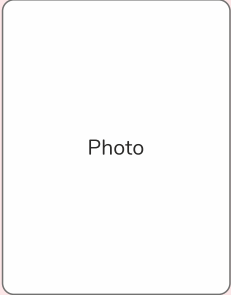




Clinical Cardio Diabetic Society of India

CORRESPONDENCE :
Secretary, CCDSI,
API Bhawan, S.P Road, Gaya (Bihar), Pin 823001
Contact No : +91 9471660096
Email: ccdsigaya@gmail.com

APPLICATION FORM FOR MEMBERSHIP



Form No. : _____
(For office use only)

(Please write in Block Letters)

Title - Dr. Prof. Mr. Mrs. Ms (Please tick as appropriate)

Name :

Age: Gender : Male Female Nationality :

Qualifications :

MCI/State Medical Council Registration No:

Address :

Mob. No :

Email ID :

Type of Membership: Life Member Life Associate Member PG Student Membership

Details of Payment : Cheque/Demand Draft in favour of "Clinical Cardio Diabetic Society of India", payable at Gaya.

1. Bank Draft / Cheque No. : _____ Dated : _____

Bank Name & Branch : _____ , Or

2. Direct transfer to CCDSI Account (IMPS/NEFT/RTGS) :

Reference No. : _____ Dated : _____ Bank Name & Branch : _____

Clinical Cardio Diabetic Society of India
A/C No: **02840110058008**
IFSC : **UCBA0000284, UCO Bank, Gaya Branch**

Signature of Applicant

Signature : _____ (Proposer)

Signature : _____ (Secunder)

Name : _____

Name : _____

Membership/Fellowship No. : _____

Membership/Fellowship No. : _____

TYPES OF MEMBERSHIP

- Life Member:** All clinicians with MD in Medicine or it's allied branches (TB & Chest, Pediatrics, Psychiatry, Skin & VD), Diploma in Diabetes and Cardiology can become Life Member by paying ₹ 7000/- INR
- Life Associate Member:** All clinicians with PG in other specialties or MBBS of 10 years duration or more & PG-Students can become Associate Life Member by paying ₹ 5000/- INR (The above fee includes ₹ 1000/- INR as state share)

Enclosures: Please enclose a copy of

- Post Graduation Degree
- MCI/State Medical Council registration number