

MEMBERSHIP APPLICATION FORM

INDIAN SOCIETY OF HAEMATOLOGY & BLOOD TRANSFUSION

Secretariat Address : ISHBT Head Office
South City Business Park, Unit - 506, 5th Floor,
770, Eastern Metropolitan, Bypass Road,
Near Fortis Hospital, Anandapur, Adarsha Nagar,
Kolkata - 700 107, West Bengal

Membership No. : L-

Life / Annual Member :

Date :

1. ***Name :** First Name Middle Name Surname

2. ***Address :**

***City :** ***State :** ***Pin Code :**

3. **Office Address :**

4. ***E-Mail :** ***Contact :**

5. **Date of Birth :** **Nationality :** **Gender :** Male / Female

6. ***Qualification :** Name of University Qualifying Year Photocopy Enclosed

***M.B.B.S.**

***M.D.**

PhD

7. ***Professional Positions Held (recent)**

A. From : To :

B. From : To :

8. ***Your Work Primarily Related to :** Patient Care? Teaching? Industry? Research? NGO?

Tick (May be more than one)

Any Other Field (Write Clearly) :

9. ***Where did you get Training in Haematology / Oncology in India / Abroad?**

10. **Publications: Books, Chapters in Books, Journals** (Attach additional sheet)

I agree to abide by the rules and regulations of Indian Society of Haematology & Blood Transfusion.

I am enclosing D.D. No. **Dated.**

Bank **Branch** **Amount Rs.**

Drawn in favor of '**Indian Society of Haematology and Blood Transfusion**', Payable at Kolkata.

***Signature of Proposer**

Signature of Seconder

Signature of the Applicant

Name:

Name:

Place:

Membership No.: L-

Membership No.: L-

Date:

All details marked with (*), must be Filled up. Otherwise, there will be delay in allotment of membership.

Subscription : LIFE MEMBERSHIP Subscription: Rs. 5,000/- only.

Bank Details

Bank Name : Punjab National Bank

Account Holder Name : Indian Society of Haematology and Blood Transfusion

Account No.: 0835010159920

IFSC: PUNB0058400

Branch : College Street, Kolkata - 700 073

BHIM UPI :

Indian Society of Haematology and Blood Transfusion



Send via Speed Post / Courier to the ISHBT Head Office address with necessary documents (M.B.B.S., M.D. and Other Certificates (If any)).

Also send payment details.

Thank you for becoming a Life Member of ISHBT.

📞 +91 99030 35498 | ✉️ ishbtmail@gmail.com | 🌐 www.ishbtish.com

follow us     