

# INDIAN STROKE ASSOCIATION

## APPLICATION FORM FOR LIFE / ORDINARY / ASSOCIATE MEMBERSHIP

Name in full :

Date of Birth :

Sex :

NSI / IAN Membership No. (if Any)

Mailing Address with  
Pin Code No. :

PHOTOGRAPH

Telephone No.

Fax No.:

Email:

Qualification:

Past Appointments and Hospital (s) where working:

Signature

Proposed by :

(NSI, IAN, ISA) No.

Signature

Seconded by :

(NSI, IAN, ISA) No.

Note: A full time worker Neurosurgery can apply for direct enrolment as a Full Member of the Society. (Workers in all other specialties and neurosurgeons in trainee are eligible for Associate Membership.)

Details of payment

Life Members Fees Rs. 3000/-

Admission Fees Rs.150/-

Payment to be made to "Indian Stroke Association" payable at Chennai. Draft / Cheque to be sent to: (Please send additional Rs. 100/- for outstation cheques)

Please send a brief CV and a passport size photograph to :

Prof.G. Arjundas,  
Professor Emeritus Neurology  
Mercury Nursing Home,  
36, Pantheon Road, Egmore, Chennai - 600 008.

Tel. No. : +91-44-2858 5024, 2855 3434 Fax No. : +91-44-2481 4876

Email : [info@stroke-india.org](mailto:info@stroke-india.org)

Any change in the mailing address must be communicated to the Secretary and Treasurer.