



NORTH EASTERN DIABETES SOCIETY (NEDS)

GUWAHATI

MEMBERSHIP APPLICATION FORM

Annual/Life/Membership Application Form
(All details to be filled in Block letters)

Photo

Member's Signature

Membership Proposed by Dr. _____ NEDS Hqrs.' Membership No. _____

To,
The Honorary Secretary General, NEDS
Guwahati

Dear Sir,
I hereby apply to be enrolled as a member of the NORTH EASTERN DIABETES SOCIETY _____ member
through Local Branch _____ under the _____ State/Territorial Branch of NEDS
Member's Name (as per MCI/SMC Certificate; IN BLOCK LETTERS): _____

Father's / Husband's Name : _____ Date of Birth

DD	MM	YYYY
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Address (Permanent / Correspondence): _____

Clinic/Hospital Address: _____

Mobile No. _____ Tel. (R) _____ Tel. (Clinic/Hospital) _____

Email ID. _____ Fax No. _____

QUALIFICATION	M.B.B.S. (1)	(2)	(3)
COLLEGE			
UNIVERSITY			

Designation (Practice/Job): _____

Registration Details : (Photocopy of Registration Certificate to be enclosed with NEDS Hqrs. Form)

Registration No. of Medical Council of India/State Council _____ Date: _____

Service (details): _____

I declare that I am registered with MCI/State Medical Council. I certify that all details/ documents furnished are true. If my statement is found to be incorrect my membership would stand to be cancelled and the fee paid by me to all sections of NEDS will be liable to be forfeited by them. I hereby give undertaking that I shall abide by the Rules and Regulations of NEDS.
Date: _____
Place: _____ Signature of the Applicant _____

Certified that I have verified the qualifications and registration of the applicant and his eligibility as per rules of NEDS for being enrolled as member of the NEDS. Forwarded to the Hony. Secretary General along with HFC.
Signature & Stamp of Hony. Secretary, Local Branch

Forwarded to NEDS Hqrs. alongwith HFC on _____
Signature & Stamp of Hony. State Secretary

Received at NEDS Hqrs. alongwith HFC on _____
Membership confirmed on _____
Signature & Stamp of Hony. Secretary General

N.B. : The Local Branch Secretary will keep a photocopy of this form & forward the original form to State/Terr. Branch Secretary along with Admission Fee & HFC and the State will also retain a photocopy of this form & send the original form along with Admission Fee and HFC to NEDS HQs. for proper record maintaining.

Membership will be commence only after it is approved and confirmed by the Hony. Secretary General. NEDS (HQs.)