



IAN MEMBERSHIP APPLICATION FORM

Membership Category: Life Membership Life Associate Membership Associate Membership

Membership No. _____ (to be assigned by IAN office)

Name: _____
(First) (Middle) (Surname)

Please affix a
passport-size
photograph

Date of Birth: ___/___/___

Gender: Male Female

Correspondence Address:

Office Address:

Phone No: _____

Mobile No. _____

Primary email Id _____

Secondary email Id _____

Website _____

Fax No. _____

Sr. No.	Qualification	University / Institute	Year of Passing	Certificate Enclosed (Yes / No)

Present Position: _____

Declaration: I hereby declare that the details furnished above are true and correct to the best of my knowledge

Signature: _____

Date: _____

Proposed by

Seconded by:

Name: _____ (IN BLOCK LETTERS)

Name: _____

IAN Membership No. _____

IAN Membership No. _____

Email Id: _____

Email Id: _____

Subsection Membership desired:

- 1) Advocacy , 2) Clinical Neurophysiology , 3) Cognitive Neurology , 4) Headache , 5) Autoimmune Disorders , 6) Interventional Neurology , 7) Movement Disorder , 8) Neuro-epidemiology , 9) Neuro-ophthalmology , 10) Neuro-otology , 11) Neuromuscular Disorders , 12) Stroke , 13) Tropical Neurology , 14) Neuro-rehabilitation .

Total number of Subsections: _____

Membership Fee

Life Membership (LM)	Rs. 8,000/- only (Rupees eight thousand only) + Rs. 500/- only (Rupees five hundred only) as admission fee.
Previously Associate Member (AM); now converting to Life Member (LM)	Rs. 4,000/- only (Rupees four thousand only) : <i>No admission fee.</i>
Life Associate Membership (LAM)	Rs. 8,000/- only (Rupees eight thousand only) + Rs. 200/- only (Rupees two hundred only) as admission fee.
Associate Membership (AM)	Rs. 4,000/- only (Rupees four thousand only) + Rs. 300/- only (Rupees three hundred only) as admission fee.
Life Membership (<i>Residing Abroad</i>)	\$157.19 US
Life Associate Membership (<i>Residing Abroad</i>)	\$125.75 US

Subsection Fee Details

Admission to one subsection at the time of filing up this form is complementary and the fee for admission to additional subsections is Rs. 1000/- only (Rupees one thousand only) for each subsection.

Note: For Clinical Neurophysiology subsection Rs. 1000/- only (Rupees one thousand only) to be remitted every 5 (five) years as (International Federation of Clinical Neurophysiology) affiliation fee.

Membership Fee Remittance by: Demand Draft (DD) , Cheque , Cash , Online Transaction

Bank Details:

Bank Name: _____

Payable at: _____

Demand Draft / Cheque No. _____