



Indian Association of Gastrointestinal Endosurgeons

APPLICATION FOR MEMBERSHIP

Serial No.....

Dated

To,

The Hony Secretary IAGES

Dear Sir,

I wish to apply for active / student / associate / international / corporate membership of the IAGES.

Passport Size
Photo

Personal Particulars (in block Letters)

Name

(Surname)

(first name)

(middle name)

Date of birth..... Sex/MF Citizenship passport No.....

Permanent Address

City State..... Pin.....

E-mail..... Website

Telephone/ Fax City Code.....

Office Residence

1) 1).....

2) 2).....

Cellular Fax No. Off Res.....

Medical Registration No Country State/

Academic Qualification Year University/Institution

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.....
.....

Training In Endoscopic Surgery/Procedures

Institution	Duration	From (Date)	Teacher
.....
.....
.....
.....

Appointments/Experience

Designation	Institution	From	To
.....
.....
.....
.....

Membership Of Other Associations/Societies

Association/Society

Membership No.

.....
.....

I, hereby certify that the above information is correct to the best of my knowledge and I agree to Abide by rules and bye-laws Of the India Association of Gastrointestinal Endo-Surgeons,

Date

Signature.....

Address Of the Institution/Hospital Attachment

..... Tel.No
..... Fax.....

Sponsors

1. Name

2. Name

Membership No. Of IAGES

Membership No. of.IAGES

Address:

Address:

Signature

Signature

Instruction for application. Please enclose the following:

- Attested photocopies of all certificates of academic qualification & registration of medical council.
- Two copies of passport size photograph in colour
- **Demand draft for Rs. 4000/- drawn in favour of "IAGES-Mumbai, payable at Mumbai. Personal cheques, bankers cheques, etc are not acceptable.**
- Return the completed application from to:
 - Dr. Sayandev DasGupta
Hon Secretary IAGES
107 Ballygunge Gardens
Kolkata - 700029
Mob 9830030390
Email: sayandev.dasgupta@gmail.com

For Office Use

Application No Received on Submitted

Approved/rejected on Membership subscription of Rs./\$.....

Received on Vide cheque/demand draft No.....

Dated Drawn on.....

Membership No.....