

MEERUT OBS AND GYNE SOCIETY

MEMBERSHIP FORM

Name : _____

Date Of Birth : _____

Residence Address : _____

E-Mail Address : _____

Mobile/Phone No. : _____

Year of passing MBBS : _____

Year of passing DGO/MD/Other : _____

(Attach Proof)

Registration No. : _____

Area of Interest : _____

Clinic / Hospital Address : _____

Speciality : _____

Topic of Academic Interest : _____

***Degree Proof Mandatory**

Membership Fees	
<i>Old Members: Rs. 1600/-</i>	<i>New Members: 2500/-</i>

Account Details:

Name of Bank: State Bank of India
Branch: LLR Medical College, Meerut (U.P.)
Account Name: Meerut Obstetrics and Gynaecological Soc.
Account No.: 39247149431
IFSC Code: SBIN0002419