

MEMBERSHIP FORM

All fields are mandatory. Incomplete forms will be rejected.

To,
The General Secretary, APSECR

Sir,

Kindly enroll me as 'Member' of the Association for Promoting
Scientific Education and Collaborative Research (APSECR)

Attach Passport
Size Photo

KINDLY MAKE ALL ENTRIES IN BLOCK LETTERS

Name: Prof./Dr./Mr./Ms. _____
(First Name) (Middle Name) (Surname)

DOB: _____ **Gender:** _____ **Nationality:** _____

Designation: _____

Highest Academic Qualification: _____
Attach photocopy of the same. For diploma/degree continuing students, attach ID cards & marksheets.

University/College/Affiliation: _____

Permanent Address with PIN code: _____

Contact: _____ **E-mail:** _____

MEMBERSHIP DETAILS

I want to apply as (tick the appropriate box):

- | | |
|---|---|
| <input type="radio"/> Honorary Life Member | <input type="radio"/> Institutional/Industrial member ₹ 3,699/- |
| <input type="radio"/> Patron ₹ 49,000/- | <input type="radio"/> Student Member ₹ 500/- |
| <input type="radio"/> Life Member ₹ 2,699/- | <input type="radio"/> International Student Membership \$49 |
| <input type="radio"/> Life Member (Senior Citizen)
₹ 1,100/- | <input type="radio"/> International Membership \$99 |

PAYMENT METHOD:

Pay to: APSECR | A/c No.: 50200033224414 | IFSC Code: HDFC0001263
Branch: HDFC Bank, Dhaliwal Tower, BMC Chowk, Jalandhar, Punjab.

PAYMENT INFORMATION:

Date: _____ Transaction ID: _____

Bank Name: _____

I, _____ agree that all the information provided above is true to best of my knowledge and I abide by the rules & regulations as per www.apsecr.org.

Date:

Signature of the Applicant

Kindly send the completed membership application, College ID Card and Proof of Payment of the membership fee through NEFT/RTGS/IMPS to:

E-mail: accounts@apsecr.org

or Courier to Mr. Abhinav Anand

Association for Promoting Scientific Education and Collaborative Research (APSECR)
257, Guru Nanak Pura (West), Jalandhar-144009 (Punjab), India

* MEMBERSHIP FEE WILL NOT BE REFUNDED/ TRANSFERRED/ ADJUSTED.

FOR OFFICE USE ONLY:

Membership No.:

Date:

Hon. Secretary