## INDIAN ASSOCIATION OF LEPROLOGISTS (IAL)

Secretariat:



A- 102, 'A' Block, Satya Apartments, Besides Hotel Golkonda, Masab Tank, Hyderabad, Telangana 500004. E-Mail: ialoffice2123@gmail.com, www.ial-leprosy.org

GST No: 36AAAAI5610B1ZB

President: **Dr. P Narasimha Rao** +91-9849044898 dermarao@gmail.com Secretary: **Dr. Sujai K Suneetha** +91-9642890381 drsujai@gmail.com Treasurer: **Dr. K. Udaya Kiran** +91-9885373616 kirankoduri@yahoo.com Paste Recent Photo

## **MEMBERSHIP FORM**

NAME									
(IN CAPITAL LETTERS)	SURNAME			FIRST NAME				MIDDLE NAME	
,							· · · · · · · · · · · · · · · · · · ·		
DETAILS	DATE OF B		Age	Med	Reg No + State	Speciality of Pr		Years of experience	
	(DD/MM/Y	YYY)				Research	1		
ADDRESS									
PHONE	CITY CODE + LAND LINE				MOBILE – 1			MODILE 2	
E-MAIL for	CITY CO	JE + LAN	ND LINE		MOBIL	MOBILE – 1 MOBILE – 2			
correspondence									
EDUCATIONAL	NAME OF			NAME OF		UNIVERSITY		YEAR OF PASSING	
QUALIFICATIONS	COURSE			COLLEGE					
SSC									
Degree									
Post-Graduation									
Others / PhD									
Training / Experience in I	Leprosy Work								
Institutional Affiliation with position									
Area of Work in Sub-speciality of Leprosy									
Type of Membership: Associate Membership / Life Membership / International membership One-time Membership fee: For Indians ₹ 5,900									
(₹ Five thousand Nine hundred only) Inclusive of Taxes. For international members: USD 236 (Two hundred Thirty Six USD only) Inclusive									
of Taxes. For Eligibility of M									
Please send relevant copies Undertaking:	or quantication	and expe	rience ce	runcai	es along with the a	ррисацоп.			
I do hereby undertake that I shall abide by the Rules and Regulations as laid down in the latest amended constitution of the									
Indian Association of Leprologists.									
<b>D</b> 1									
Place : Date :							C	ignature of Applicant	
Proposed by	(Name)					(Signature )			
Seconded by	(Name)							(Signature )	
Online Transfer ID:	Date:					Fees Structure (Inclusive of Taxes)			
			<u> </u>			Types of Life M		/	
Online Transfer Details : NEFT/ RTGS						Life member		₹ 5,900/-	
Online Transfer Details; NEFT/ KTUS						Associate member		₹ 4,720/- USD 236	
Name of Account: 'INDIAN ASSOCIATION OF LEPROLOGISTS'					SAARC country		USD 177		
<b>Account no:</b> 50100433934011					Digital Payment				
IFSC / NEFT Code: HDFC0000632,						Scan to	Pav	PhonePe	
Bank & Branch: HDFC Bank, Alwal Branch, Shop No 12 & 28,						Dean to	1 ay	INDIAN ASSOCIATION OF LEPROLOGISTS	
Satya Complex, Alwal Main Road, Hyderabad - 500010 · Branch Code: 0632. MICR Code: 500240016.									
Dianen Code: 0032. Wil	CR Code: 9002	10010.							
N-4									
Note: Please send the Soft copy of proof of money transfer, along with filled									
application form, with relevant certificates to the official									
E-Mail: ialoffice2123@g			33					G Pay Paytm 🐧 🔁 🤣	