



The Indian Association of Palliative Care was formed in 1994 in consultation with the World Health Organisation (WHO) and the government of India as a national forum to promote the care of people with life-limiting illness such as cancer, AIDS and end-stage chronic disease. Membership is open to individuals, palliative care organisations and corporate bodies, in India or abroad, involved or interested in palliative care and research and willing to adhere to the rules and regulations of IAPC. Members are entitled to receive regular despatches on IAPC activities and to participate in the general body meetings of IAPC. Organisations and corporate bodies may nominate one person, who need not be a member, to attend IAPC general body meetings.

LIFE MEMBERSHIP FORM

Please key in and print or write legibly in block letters.

FULL NAME

| | | | | |
|----|----|----|-----|--|
| Dr | Mr | Ms | Mrs | |
|----|----|----|-----|--|

REGISTERED NAME OF ORGANISATION OR COMPANY *(in case of non-individual membership)*

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ADDRESS

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| | | | | | | | | | |
| | | | | | | | | | |
| State | | Country | | PIN/Zip code | | | | | |

PHONE NO.

EMAIL ADDRESS

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PROPOSED BY

| | | | |
|------|--|------------|--|
| Name | | Member No. | |
|------|--|------------|--|

SECONDED BY

| | | | |
|------|--|------------|--|
| Name | | Member No. | |
|------|--|------------|--|

PAYMENT DETAILS *(See fees schedule below.)*

| | | | | | | |
|--|--------|----|------|--------|---|--|
| Cash | Cheque | DD | NEFT | Amount | ₹ | |
| Cheque/DD no., bank name, transfer details | | | | | | |

Cheques must be crossed and in favour of "Indian Association of Palliative Care", payable at Pune, India. Details for NEFT: State Bank of India Current Account no. 33808019294, IFSC Code SBIN0016847, State Bank of India, Popular Nagar Branch, Warje, Pune 411058. For payment related queries, please write to drviveksn@gmail.com.

| | | | | | | | | | | |
|-----------|--|------|---|---|---|---|---|---|---|---|
| Signature | | Date | D | D | M | M | Y | Y | Y | Y |
|-----------|--|------|---|---|---|---|---|---|---|---|

Membership granted at the sole discretion of IAPC.

| LIFE MEMBERSHIP FEES | | | |
|--|--------|-------------------------------|----------|
| Doctors | ₹ 2000 | Overseas members | \$ 100 |
| Nurses and others | ₹ 1000 | Palliative care organisations | ₹ 10,000 |
| Unpaid volunteers <i>(subject to certification by recognised institution in separate form)</i> | ₹ 500 | Corporate bodies | ₹ 50,000 |

All payments subject to realisation. Please add conversion charges and bank fees to payments in foreign currency.

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|---------------------|--|------|--|
| FOR IAPC USE | | | |
| MEMBERSHIP APPROVED | | | |
| Receipt no. | | Date | |
| Membership no. | | | |