



Nuclear Medicine Physicists Association of India
“Triumph of Technology”

MEMBERSHIP APPLICATION FORM

1. Full Name (in capital):

2. Father's Name:

3. Date of Birth:

4. Gender:

5. Citizenship:

6. Field of Specialization:

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7. Office Details		Residence Details	
Office Address (In detail)		Residence Address	
Email Address		Email Address	
Phone/Fax		Phone/Fax	

8. Preferred Mailing Address: Office/ Residence/ Any other (give details):

9. Basic Educational Details				
Course Name	Year of Passing	Institution Name	Board/University	Subjects

10. Professional Educational Details				
Course Name	Year of Passing	Institution Name	Board/University	Subjects

11. Internship/Work Experience				
Category	Role	Institution/Company/Hospital Name	Start Date	End Date

12. Award /Honors/ Fellowships(If any):

13. Specialized Training/Certificate/Licenses:

Payment Amount..... ..DD/ITR NEFT/ Cheque Number/ UPI (select one).....
Bank name with branch.....Payment date.....

Declaration:

All the above information are correct with best of my knowledge and belief. In future if I found concealing any information at any stage, my membership shall be forfeited. I will abide by professional ethics and discipline as per NMPAI rules and regulations.

Date:

Applicant Signature

Place:

List of enclosed documents: 1. Fee receipt 2. Academic and Pass certificates 3.RSO Certificate (Optional)

For Office Use Only:		
		Remarks
Membership Application (Accepted/ Rejected)		
Money Receipt issued		

Details for the payment



Membership fee (For life membership)- Rs 1000 /-

Membership fee (For Student membership)- Rs1000/

Payment Mode: By cheque, DD, Net banking, UPI ap

Account Name: M/s NUCLEAR MEDICINE PHYSICISTS ASSOCIATION

Account Number (123005001407) IFSC Code/RTGS : ICIC0001230

MICR 400229154 , Swift Code :ICICINBBCTS

PAYABLE AT ICICI BANK, Mumbai- Parel CCD Branch

Complete Address of Bank: Abhinandan Chs Shop No 3, Dr. Ambedkar Road, Parel, Mumbai Maharashtra, 400012

Contact Email : nmpai.secretary@gmail.com