

# CANCER SOCIETY OF KASHMIR

کینسر سوسائٹی آف کشمیر

4-Bagh-i-Islam Colony Lal Nagar, Chanapora Srinagar 190 015

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## MEMBERSHIP FORM

The Chairman,  
Cancer Society of Kashmir,  
Srinagar.

Affix recent  
Photo Here

Subject: Request for Life/Annual/Student Membership.

Dear Sir,

I would like to offer my voluntary services for the Society in achieving its objectives regarding awareness, early detection and prevention of Cancer in the capacity of Life/Annual/Student Member. I would abide by the constitution of the Society in letter and spirit.

Kindly accept my Membership. The necessary particulars in this regard are as under:-

1	Name	
2	Parentage	
3	Permanent Address	
4	Contact Address	
5	Telephone Numbers	Office:- Residence:-
6	E-Mail Address	
7	Profession/Designation	
8	Name of the Institution	
9	Introduced by	

Signature of Introducer

Signature of the applicant.

For Office use only:-

Executive Committee has approved/not approved membership of Mr. /Mrs. \_\_\_\_\_  
S/o D/o w/o \_\_\_\_\_

Membership fee of Rs \_\_\_\_\_ received vide Cheque No. \_\_\_\_\_

Dated \_\_\_\_\_

Secretary/Joint Secretary.