



# Uttar Pradesh Diabetes Association®

(Registered under Societies of Registration Act. 2/1860 Registration No. 480/2D03 Dated 18 June 2003)

## Membership Form

Full Name: .....

Date of Birth:.....

Postal Address :.....

.....Pin Code.....



Telephones: STD Code.....Resi.....Off./Clinic.....

Mobile :.....E-mail : .....

Qualifications (Minimum qualification is MBBS)

MBBS: Year: College:

MD: Year: College:

DM : Year: College:

Enclosed: DD for Rs. 2000/- No.....Dated .....

Drawn on.....Bank, payable at Lucknow,  
favouring "Uttar Pradesh Diabetes Association" or "UPDA" (For outstation cheques,  
please add Rs. 75.00 for bank charges)

### Bank Detail -

Bank Name - Punjab National Bank

A/c - 0302010160563

Ifsc - PUNB0030220

Signature of the Applicant

Proposed by :

Seconded by :

( )  
Membership No.

( )  
Membership No.

Must attach photocopy of yours MBBS/MD Degree or MCI Registration Certificate  
You can also send this form to Dr.