

For Office use only
R/No. _____
Date _____
Membership No. _____



PHOTOGRAPH

API Membership Application Form

To,
The General Secretary
The Association of Physicians of India
Turf Estate # 6 & 7, Off Dr. E. Moses Road, Opp. Shakti Mills Compound, Nr. Mahalaxmi Station (West), Mumbai 400011
Tel : (022) 6666 3224 / 2491 2218 • Fax : (022) 2492 0263 • e-mail : api.hdo@gmail.com • www.apiindia.org

We hereby propose the admission

Name (Surname) _____

First name _____ Middle Name _____

(BLOCK LETTERS)

Qualifications : _____
(Mention the branch of Medicine in which Postgraduate qualification is obtained)

University : _____

Year of obtaining first Postgraduate qualification : _____

Address : _____

City _____ District _____

State _____ PIN _____

Tel. (Office) : _____ Tel. (Resi.) : _____ Fax : _____

email : _____ Mobile : _____

as a LIFE LIFE ASSOCIATE member of the Association POST GRADUATE MEMBERSHIP
(Please ✓ appropriate)

MEMBERSHIP FEES : Life Member / Life Associate Member : ₹ 7,500 plus admission fees ₹ 1,100. Total ₹ 8,600.

POSTGRADUATE MEMBERSHIP FEES : Non refundable part payment of the 50% (₹ 3750) plus admission fees ₹ 1,100. Total ₹ 4850. of membership fees initially followed by the rest of the payment after passing (within three years).

Details of payment : In favour of "Association of Physicians of India" (Cheque* / DD / Cash). Applicant's from outside Mumbai are requested to send Cheque / Demand Draft payable at Mumbai. (*For **outstation cheques** add ₹ 100)

- For Life / Associate Members: I hereby direct The Association of Physicians of India to transfer ₹ 7,500 to the Corpus Fund and the balance of ₹ 1,100 for admission fees.
- For Post Graduate Members:- I hereby direct The Association of Physicians of India to transfer ₹ 3,750 to the Corpus Fund and the balance of ₹ 1,100 for admission fees. The remaining balance of 50% will paid after completing Postgraduate degree.
- I hereby state that the above information given is true and correct.

Note for proposer / seconder : To the best of our knowledge and belief the above particulars are correct, and we consider him/her a fit proper person to be admitted as a member of the Association.

Signature of Proposer

Signature of Seconder

Name _____

Name _____

Membership No. _____

Membership No. _____

Subject to the approval of the Governing Body in an ordinary or a special meeting, I agree to become a member and if admitted, to abide by the Rules and Regulations of the Association.

Signature of Candidate

Note by Secretary

Xerox copies of registration with Medical Council and Postgraduation Certificate by a recognised university should accompany the application form
For PG letter from head of the institution should accompany the application form with clear dates of joining the department and MBBS certificate (Xerox copies)

N.B. Kindly read carefully the rules and regulations printed overleaf before filling this form.

Rules & Regulations of the Association Regarding Admission of Life Members / Associate Members / Postgraduate Members

LIFE MEMBERS

: Life Members are required to possess a post-graduate degree such as MD/DNB, DM, or equivalent in internal medicine from any institution or university recognised by the Medical Council of India and/or approved by the Governing Body of the Association. MD General Medicine / Internal medicine includes specialities such as Cardiology, Gastroenterology, Diabetology, Nephrology, Neurology, Clinical Haematology, Chest & Tuberculosis, Endocrinology, Gerontology, Infectious Diseases, Allergy, Immunology, Rheumatology, Medical Oncology and others approved by the Governing Body notified by the General Body. Life membership shall be open to citizens of India only.

LIFE ASSOCIATE MEMBERS : A person holding a post-graduate degree or diploma recognized by Medical Council of India in any branch of medical science related to General Medicine who is not eligible for life membership shall be enrolled as a Life Associate Member. Life Associate Members shall have no voting rights, nor the rights to propose, second any one or contest for any office of the Governing Body. Life Associate Members of the Association are not eligible for any oration, lectureship or any other award of the Association.

POST GRADUATE MEMBERS : Post Graduate students in Medicine for the membership of API which will be made postgraduate member on non refundable part payment of the 50% of membership fees initially followed by the rest of the payments after passing MD/DNB which will be paid within 3 years of initial payment. PG Members shall have no voting rights, nor the rights to propose, second any one or contest for any office of the Governing Body. Postgraduate Members of the Association are not eligible for any oration, lectureship or any other award of the Association.