

Indian Society of Vegetable Science (ISVS)

Form of Application for Life membership

Personal Information

First Name

Middle Name

Last Name

Designation/Occupation

Address:

City/VillageStatePin Code

Phone (Office)Phone (Residence)

Mobile..... Fax

Email ID

Membership Fee Details

Membership Type Check/DD Number / Online transaction details.....

Issuing Bank Name Issued Date

Amount (Rs.).....

(Cheque/DD should be drawn in the favour of ‘Secretary ISVS Varanasi’ payable at Varanasi, UP)

(For Office Use Only)

Membership ID Invoice/Receiving No.

Declaration:

I wish to be enrolled as a Life member of the Indian Society of Vegetable Science. I have read the Constitution of the Society and in agreement with the same.

Date:

Signature

Bank Details:

Name of the Account Holder: Indian Society of Vegetable Science
Name of the Bank: State Bank of India
Address of the Branch: IIVR Branch, Varanasi
Account No.: 34585130510
Type of Account: Current Account
MICR: 221002076
Branch code: 14905
IFSC Code: SBIN0014905

The online transaction receipt must be sent to secretary.isvs@gmail.com and or treasurerisvs@gmail.com