



TRANSPLANTATION SOCIETY OF PAKISTAN APPLICATION FORM FOR MEMBERSHIP

MEMBERSHIP NO:

ELIGIBILITY:

TSP WELCOMES TO FULL MEMBERSHIP ANYONE WHO IS ASSOCIATED, INTERESTED OR WORKING IN TRANSPLANTATION AND HOLDS A MINIMUM OF BACHELOR'S DEGREE IN MEDICINE, SURGERY OR ALLIED FIELD.

INITIATION:

Memberships initiate and renewed in January each year nominations received prior to September 1 are credited to current year.

First Name	Initial	Last Name	Title
Mail Name	(As you want to appear on your mailing label)		
Address	(Where you want to receive your communication)		
State/Province	Postal Code	Country	
Telephone No.	Cell No	Fax No.	Email
Highest Degree	Subject Area	Year Earned	
Employer			
Present Position			
Nominated By			

MEMBERSHIP DUES:

LIFE MEMBERS RS. 5000/-
REGULAR MEMBER RS. 500/-
HONORARY MEMBERS _____
SUPPORTING MEMBERS _____

CHEQUES PAYABLE TO:

Transplantation Society of Pakistan

Send to:

The General Secretary
Transplantation Society of Pakistan,
Sindh Institute of Urology and Transplantation,
Civil Hospital 74200, Karachi Pakistan
Tel: (+9221) 2730351, 2730387
Fax: (+9221) 9215469, 9215362
Email: info@tx-society-pk.org, info@siut.org
Website: www.tx-society-pk.org