

7. Membership with other societies (specify)

8. Details of Company

9. Details of your Chairman and leaders

Date:

**Signature of the Chairman / Managing Director/ President / Dean
Use For Seal and Official Company seal or institutional seal**

Proposed by:	
Address	

(Please enclose recommendation letter from the proposer.)
Proposer should be a IACC life member

NB:KEEP A COPY OF DD FOR FUTURE COMMUNICATIONS

Please complete two copies of this form with required enclosure as indicated under respective items and send to **the President, Indian Association of Clinical Cardiologists** - with a Demand Draft issued in favor of the **“Indian Association of Clinical Cardiologists” payable at Trivandrum** for the amount .

Corporate Members	Life members	Annual Members	Assoc. Members	PGT Members
Rs.500000/- (one time)	Rs.10000/ (one time)	2500/ Annually	5000/ (Annually)	2000/ (one time)

Send completed application with DD or Cheque to address below:

IACC
 "VARDAN",
 c/o Dr. Muneer, Spring Valley Garden Road, Near KIMS Hospital,
 Anayara.P.O Trivandrum-695029,Kerala,India E-mail:
office@accindia.org, Phone: 0471-3191414,
 Mob:No: 9846959888Fax: +91-471-2382241 www.accindia.org

***NB: Keep a Copy of DD always. For Verification purpose IACC office can ask you any time.

For office use only

Date of receipt of application _____

Recommendation from the Credential Committee:

Date of completion of the procedural formalities:

Date of Executive Committee meeting:

Accepted:

Not accepted (mention reason)

Signature of the Secretary

Signature of the President