



NUTS OF SAARC SECRETARIAT

Secretariat Office: 218, Cotta Road, Borella, Colombo 08, Sri Lanka

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[Web site: www.nutsofsaarcsec.org](http://www.nutsofsaarcsec.org)

[E-mail info@nutsofsaarcsec.org](mailto:info@nutsofsaarcsec.org)

Membership Form

Personal Details

Surname (Last Name)

First Name with initials

Dr. Prof. Mr. Mrs. Other

Preferred Mailing address

City & Postal Code

Country

Date of Birth

County of Citizenship

Sex

Tel

E mail

Business Details

Hospital Address

City & Postal Code

Country

Academic Details

Academic Appointment Full Time Part Time None

Primary Institutional Affiliation

eg. adult nephrology, pediatric nephrology, pathology, urology, physiology, transplant

Primary Professional Interest

eg. medical school-faculty clinical dept., medical school-faculty research dept., hospital private practice, armed fo. or other federal services, etc

Present Hospital University Appointments *(title and departmental affiliations)*

Please indicate the amount of time spent on the following activities Your total should amount to 100 percent.

Clinic	Research	Teaching	Administartion	Other
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Professional education training

Institutional Name / Address	Degree	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Training in nephrology/urology *(Give inclusive dates for residences fellowships, other relevant postgraduate education)*

Institutional Name / Address	Degree	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

List your four most significant publications

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

I wish to enroll as a life member in the Nephrology Urology Transplantation Society of SAARC Countries. I have completed Form and USD 100 (Life member fee) is being sent.

Signature

Date

Payment Details :

Please Fax or Scan and email This Form along with USD 100 for membership as International draft to " NUTS OF SAARC Secretariat" or equivalent if paid directly.

Bank Details :

ACCOUNT NAME - NUTS OF SAARC SECRETARIAT
 BANK NAME - AMANA BANK, LADIES BRANCH, COLOMBO 03, Sri Lanka
 ACCOUNT NO - 0010167798001
 ACCOUNT TYPE - CURRENT ACCOUNT
 SWIFT CODE - AMNALKLX

Can you contribute any pictures of NUTS OF SAARC activity? - New or old

Can you recommend any NUTS to be sent application forms

Name	Designation	Email address
<input type="text"/>	<input type="text"/>	<input type="text"/>