



Ayush Doctors & Para Medical Association

Regd. Office:- K-249, Mahipalpur Extn. New Delhi-110037 (India)

Head Office: Aman Nagar, Behind Green Land School, Near
Jalandhar Bypass, Ludhiana – 141008 (Pb.)

Ph. No.:- 0161-6410570 (M) :98881-80388, 93168-50388, 92161-50388, 92167-50388, 92176-03232

Website:www.ayushparamedicalassociation.com//Email Id: adpma2001@gmail.

Application Form For Membership

Hon'ble President / Gen. Secretary
Ayush Doctors & Paramedical Associations

Photo

Sir,

1. Full Name.....
2. Father's / Husband's Name.....
3. Permanent Address.....
.....
.....
4. Correspondence Address
5. Phone No.Mobile No.....
6. Date of Birth:.....
7. Marital Status : Married Unmarried Widow Widower
8. Educational Qualification:
9. Medical Registration No. (If Regd.)..... Date of Regd.....
10. Name of Registration Board/Council.....

Date:

Full Signature of Applicant

Place:

Stamp

Instructions

1. Attach Xerox copy of Medical Qualification and Registration Certificate.
2. Attach D.D. In favour of Dr. Rajvir Singh Mathur payable at Ludhiana.