

**HEART FAILURE SOCIETY**  
**MEMBERSHIP APPLICATION**

**Applicant:** Please TYPE or PRINT legibly and complete ALL information requested

Name (last, first, middle initial) \_\_\_\_\_ degree \_\_\_\_\_

mailing address: \_\_\_\_\_

city: \_\_\_\_\_ state/province: \_\_\_\_\_ zip/postal code: \_\_\_\_\_ country: \_\_\_\_\_

phone: \_\_\_\_\_ fax: \_\_\_\_\_ e-mail address: \_\_\_\_\_

present hospital/university affiliation/firm/corporation: \_\_\_\_\_

professional education and training  
college, graduate or medical school, postgraduate training) \_\_\_\_\_ dates attended \_\_\_\_\_ degree \_\_\_\_\_

present activity in the field of heart failure \_\_\_\_\_

list other society memberships (optional) \_\_\_\_\_

Membership: Annual Dues (January-December)

**ADMISSION FEES : Rs.1000/- (one time) (to be sent along with membership fees)**

**MEMBERSHIP FEES**

Annual Membership Fees : Rs.1000/- per year

Life Membership Fees : Rs.5,000/-

Corporate Member : Rs.1,00,000/- at a time

Associate Member : Rs.500/- per year

**Life Membership**

Check the category that  
best describes your profession  
profession

Cardiologists  
Cardiothoracic Surgeons

Pathologist with interest in Cardiac Field  
Pharmacologist with interest in Cardiac Field  
Physicians & Pediatricians who completed  
5 yrs of Annual Membership  
Biomedical Engineers involved in the  
field of CV Sciences  
Scientists involved in the field of CV Sciences

**Annual Membership**

Check the category that  
best describes your profession

Cardiologists  
Cardiothoracic Surgeons

Pathologist with interest in Cardiac Field  
Pharmacologist with interest in Cardiac Field  
Physicians & Pediatricians  
Biomedical Engineers involved in the field  
of CV Sciences  
Scientists involved in the field of CV Sciences

**Associate Membership**

Check the category that  
best describes your

Dieticians  
Nurses/Nurse  
Practitioners  
Physiotherapists  
Technicians  
PG Students in Medicine  
& Pediatrics

**Payment: Payments (Membership fees + Admission fees if first time) may be made by Cheque drawn in favour of "Heart Failure Society" Hyderabad**

- Please enclose a copy of your Post-graduate qualification details

**Address to be Posted: Dr.A.G.K.Gokhale**

**Chief Cardiothoracic, Vascular & Transplant Surgeon  
Secretary - Heart Failure Society  
Global Hospitals, 6-3-1070/1to 4, Lakdi-ka-pul  
Hyderabad- 500 004.**

**SIGNATURE**