

Membership form

Kindly enter my membership for ISPCD
Name of Individual/Individuals

State/country_____

One Year Membership fees

Country	Developing	Developed
1 year	155 USD	200 USD

Demand Draft /cheque No/other _____

Dated _____

Bank/Branch _____

Drawn In favour of “International Society of Preventive and Community dentistry”

I agree the rules and regulations of association as a member from time to time during entire duration of membership.

Signature of member

Bank details for direct deposit or transfer:

A/C: International Society of Preventive and Community Dentistry
HDFC Bank, Current Account
Branch: Shela, Ahmedabad, Gujarat
Acc no: 02291450000263
IFSC Code: HDFC0008860
SWIFT Code: HDFCINBBXXX

International Society of Preventive and Community dentistry (ISPCD)

Membership Form

**Office:
ISPCD,
G45, Poonam Pride,
Khadiya
Shela, Ahmedabad
Gujarat, India 380015**