

**APPLICATION FORM
for MEMBERSHIP OF
S.A.T.H.I.**

(Society for Administration of Telemedicine and Healthcare Informatics)

To,
Hony. General Secretary
S.A.T.H.I.
28/31 Old Rajinder Nagar, New Delhi 110060
Phones: (011) 25852291, 25853090, 25860163
Email: sathi@amlamed.com
URL: www.sathi.org

Space for
photograph

Sir,
I request you to kindly enroll me as a Life member of I.A.M.I.
I hereunder give my particulars

Name in Full:

Qualifications:

Institution:

Designation:

Office Address, Telephone, Fax & E-Mail:

Residential Address, Telephone, Fax & E-Mail:

Preferred Address for correspondence: **Office** **Residential**
(Check appropriate – Receipt will be sent at this address)

Best time suitable for contact _____ at Phone Number _____

Areas & Fields of Work / Interest:

I am enclosing herewith a crossed cheque / demand draft with Serial No.....
Of Bank.....Place.....Dated.....
In favour of 'S.A.T.H.I.' payable at New Delhi for Rs...1000/-..(please add **Rs. 50.00** for **outstation cheques**)

Yours truly,

Signature with stamp or name in capitals.
Designation.

Date:

You can also E Mail the filled form using a digitized photo, but make sure that a signed hard copy is also dispatched. Payment may also be made locally into our UTI Bank Anywhere account, - we can make the account number available on request.

Please go through the constitution of S.A.T.H.I. (attached) and provide a certificate as follows:

I, Mr/Dr/Ms _____, have gone through the rules of the constitution of S.A.T.H.I. and hereby agree to abide by the said rules.

Signed
DEPONENT

Additional Information requested:

Not mandatory but will help us all to create an appropriate slot for you in our organization.

- Please attach in 2 or 3 paragraphs about your activities relating to Telemedicine and Healthcare Informatics and in what way can you contribute to the activities of SATHI.
- Please indicate as to how much time can you spare for activities of our society.
- Are you willing to travel to places outside your home town for performing these activities?
- If so, please provide a certificate that the activities performed by you for the society shall be of a voluntary basis. (An honorarium may be provided only if the funding situation permits)