



INDIAN CERAMIC SOCIETY

Care : CSIR-CENTRAL GLASS & CERAMIC RESEARCH INSTITUTE • KOLKATA – 700 032 (INDIA)
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APPLICATION FOR ANNUAL FOREIGN MEMBERSHIP

(To be filled in and returned to the Hon'y Secretary along with a brief bio-data*)

I desire to become an Annual Member of the Indian Ceramic Society.

I furnish the following information concerning myself. I promise that, if admitted, I will be bound by the Constitution of the Society and will endeavour to promote its aims and objectives.

Name of Applicant: (Dr/Mr/Ms)
(in block letters) 1st name 2nd name (if any) Surname

Qualifications : Date of Birth

Employed at :

Designation :

Business Address:

Street : City/Town/Village :

State : Country : Zip code

Phone: FAX : E-mail:

Residential Address :

Street : City/Town/Village :

State : Country : Zip code

Phone: FAX : E-mail:

I desire communications to be addressed to me at Business/Residential address.

Subject of Interest: (mark not more than two from below)

- | | | | |
|---------------------------------------|-----------------------------|----------------------------|--------------------|
| Engineering Ceramics (EC) | Electronic Ceramics (ELC) | Glass (G) | Refractories (R) |
| Whiteware and Heavy Clay Products (P) | Coatings and Colours (CC) | Composites (C) | Raw Materials (RM) |
| Vitreous and Porcelain Enamels (E) | Machinery and Equipment (M) | Any other (please specify) | |

Signature of the Applicant : Date:

We, the under mentioned members of good standing of the Society, from our knowledge about the candidate, recommend him/her for admission.

Name of the Proposer : Signature : Membership No.:

Name of the Seconder:.....Signature : Membership No.:

*Educational Qualifications, Employment, Experience, Papers published (if any, only nos.) Patents (if any) and Major professional contributions

Annual Subscription: US \$ 80 and Admission Fee: US \$ 30

FOR OFFICE USE ONLY

Date of payment of admission fee and first subscription : Receipt No. : Amount :

Membership No. :Date of enrolment : Signature :