INDIAN CERAMIC SOCIETY

Care : CSIR-CENTRAL GLASS & CERAMIC RESEARCH INSTITUTE • KOLKATA – 700 032 (INDIA)
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APPLICATION FOR FOREIGN LIFE MEMBERSHIP
(To be filled in and returned to the Hony Secretary along with a brief bio-data*)

I desire to become a Life 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:** .....

Dist:..... **State:** ..... **PIN:**.....

Phone: ..... **FAX :**..... **E-mail:** .....

Residential Address : .....

Street :..... **City/Town/Village:** .....

Dist: ..... **State :** ..... **PIN:** .....

Phone: .....**FAX:**.....

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**

Subscription: US $ 350 and Admission Fee: US $ 50

FOR OFFICE USE ONLY

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

Membership No. : .....**Date of enrolment :** ..... **Signature :** .....