



INDIAN SOCIETY OF RADIOGRAPHERS & TECHNOLOGISTS



MEMBERSHIP REGISTRATION FORM

1. Name :
2. Age & Date of birth : Gender :
3. Father's / Husband's Name :
4. Present Designation :
5. Current Employment details :
 - a) Type of establishment : Med. College Teaching Institution Hospital Diagnostic Clinic Industry
 - b) Name of establishment :
 - c) Sector : Government Private Co-operative Autonomous Body Quasi Govt. Own Establishment
 - d) Official Address
- Ph:
6. General Qualifications :
7. Details of Professional Course & Training undergone in Radiological Technology :
 - a) Name of course :
 - b) Trained in : Diagnostic Radiology Radiotherapy Nuclear Medicine Any other
 - c) Type of course : Diploma Post Diploma Degree Post graduation Doctorate
 - d) Duration : From To Month & Year of Passing :
 - e) Name of Institution Studied & Address :
Ph :
 - f) Training Recognized by : Central Govt. State Govt. Council University Board
- (Please enclose a photocopy of your training certificate)
8. Experience Details : Total years :
 - (a) Diagnostic Radiology yrs (b) Radiotherapy yrs (c) Nuclear Medicine yrs
9. Permanent Address :

Pin : Resi.Ph:

Mobile : E-mail :

10. Details of Membership fee Paid : Amount: D.D No

Name of Bank: Date :

11. Address to which Certificate / Correspondence are to be sent

Pin: Ph:

12. Other information if any :

I herewith declare that all informations furnished above are true & correct to the best of my knowledge and belief. I also undertake to abide by the Rules and Regulations of the Society. Kindly enrol me as a member of I.S.R.T.

Place :

Date :

(Instructions overleaf)

Name & Signature of applicant

INSTRUCTIONS

For membership & Registration Enquiry, Please contact:

Mr. Suresh Malayath (Gen: Secretary)

Ph: +91 98464 33944

Mr. Rajeev Krishnan (Finance Secretary)

Ph: +91 94968 04998

MEMBERSHIP FEE:

- | | |
|--|----------------------------------|
| (i) Life Membership & Registration | : Rs.1000 /- |
| (ii) Associate Membership & Registration | : Not issuing now |
| (iii) Provisional Membership & Registration | : Rs.1000 /- (For students only) |
| (iv) Overseas Membership & Registration | : 100 Uro |
| (v) Overseas Associate Membership & Registration | : 200 Uro |

Fee should be paid by Demand Draft Only. DD should be taken in favour of

I.S.R.T. payable at Kottayam

Form should be addressed to:

Mr. BIJU PAULSON

Chairman, ISRT Core group (Registration)

CT Scan - Cancer Block

Dept. of Radio Diagnosis

Govt. Medical College

Gandhi Nagar,

KOTTAYAM-686 008,

Ph: +91 9495746513

Email: mailisrt@gmail.com

Important Guide lines to Candidates:

Please give true and correct information.

Tick appropriate boxes in application form.

Use more than one box for tick, if applicable.

Please enclose a photocopy of your certificate in Radiological Technology.

Please enclose one additional passport size photograph.

Registration Certificate will be available within 45 days of receipt of application.

Separate requisitions are needed for fast track delivery of certificates

Fees required for fast track delivery is Rs.500 only. and time required is 10 days

Students are not eligible for registration certificate till they are qualifying the course

Separate requisitions are also needed for all special services offered by ISRT

FOR OFFICE USE ONLY

Membership No :	Type :
Receipt No :	Amount :
Cash/ D.D No. :	Date :

Signature of Chairman Core Group (Registration)

Approved by

President

General Secretary

ID card and certificate sent on :