

Indian Association of Life Skills Education (Under 8 of T.N Societies Registration Rules 1978 of T.N Act 27 of 1975)

	MEMBERSHIP FORM		A CC	
. Name :			Affix Passport size Photo	
. Gender :	Male Female			
	:			
. Address for Co	ommunication:			
PIN				
State :				
Country :				
Country : Phone :				
Country : Phone : Fax:				
Country : Phone : Fax: Mobile No :				
Country : Phone : Fax: Mobile No : E.mail :				
Country : Phone : Fax: Mobile No : E.mail :				
Country : Phone : Fax: Mobile No : E.mail : 6. Educationa Degree	l Qualification:			
Country : Phone : Fax: Mobile No : E.mail : 6. Educationa Degree U.G	l Qualification:			
Country : Phone : Fax: Mobile No : E.mail :_ 6. Educationa	l Qualification:			

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8. Details of Professional Experiences:

Profession	Name of the Organization	Job Description	Experiences in Years		
Teaching					
Training					
Research					
Others					
	Type of Membership	Fee Structure			
	Patron/Institutional Member	Rs. 10,010/-*			
	Life Member	Rs. 4,010/-*			
* Membership	form Rs.10/-				
11. Payment D	etails:				
Type of Memb	ership:				
Cash/NEFT D	etails/(Transaction ID)/	:Rs			
Date of payme	ent/Transfer:/	(DD/MM/YY)			
Name of the B	ank :				
Amount payab Name of a/c ho	ole to: older: Indian Association of Life	e Skills Education			
	ank Name: Canara Bank Savings A/c No: 2926101003784				
	First Avenue, Ashok Nagar, Ch				
IFSC code: CN	NRB0000975 MICR Code: 6	500015006			

Note: To complete the entire membership payment process please email your filled-in membership form (scanned copy) along with your online transaction details to The Secretary, IALSE $\underline{ialse.india@gmail.com}$

Signature with Date