

INDIAN ACADEMY OF MATHEMATICS

INDIAN ACADEMY OF MATHEMATICS, INDORE

Secretary

e-mail: indacadmath@hotmail.com

profparihar@hotmail.com

Mob.: 09425414010

5, 1st floor, I.K.Girls School Campus

14/1, Ushaganj, GPO,

Indore - 452016

Application Form for Membership

Individual Membership:

Class Of Membership (Please tick any one)

Long Membership (For Five Years)

Ordinary Membership (One Calendar Year)

1. Name: _____

2. Date Of Birth: _____

3. Academic Qualifications, Instt. & Year: _____

4. Present Position & Institution _____

5. Field Of Research: _____

6. Teaching Interest: _____

7. Mailing Address: _____

_____ Pin _____ State _____

Tel./Mob.No. _____ e-mail: _____

8. Signature: _____

9. Date

Declaration: "I declare that I shall abide by the rules and regulations of the Society, and that the publications of the Society received by me shall be for my personal use only".

Signature, Date

- Note :
1. The membership will be accepted only after the approval by the Enrollment Committee.
 2. The members are entitled to get a copy of Volume of the JIAM of the year/ period of subscription for their personal use
 3. The Enrollment Committee has right to either accept or reject the membership form.