



NATIONAL SAFETY COUNCIL OF INDIA

APPLICATION FORM FOR LIFE /INDIVIDUAL MEMBERSHIP

1. Name in full (capital letters) :
- Mailing Address with PIN Code (where Membership services to be sent) :
 - Telephone No. with STD Code :
 - Fax No. :
 - E-mail :
 - **Permanent Address with Pin Code** :
2. Date of Birth :

Day		
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Month		
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Year			
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3. Qualifications :
4. Professional Experience (In completed years) :
5. Experience in OHS field (In completed years) :
6. Occupation :
7. Have you undergone any Safety Course? :

Yes	No
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Title of Course Organised by Period
If yes, please give details
8. If employed :
- a) Name & Address of the Employer :
- Telephone No.with STD Code :
- Fax No. :
- E-mail :
- b) Position held in the Organisation :
9. Any other particulars you wish to furnish :
10. Membership desired :

LIFE

INDIVIDUAL

[Please (✓) the membership type applied for]
11. Membership Fee Payable :

Rs.

Rs.

Rs.

(a) Entrance Fee* + (b) Subscription = (c) Total

Please draw Demand Draft in favour of **National Safety Council** Mumbai.

Enclosed DD No.....Date.....for Rs.....drawn on
(Bank and its branch)

Membership fees:

(w.e.f. April, 09)

Life Membership

- i) Entrance Fee Rs 400/-
ii) Subscription Rs 6,500/-

Individual Membership

- i) Entrance Fee Rs 400/-
ii) Annual Subscription + Rs 600/-

+ Our Financial Year is from 1st April to 31st March.

Place :
Date :

Forwarded to :
National Safety Council
Plot No. 98A, Institutional Area
Sector -15, CBD Belapur
NAVI MUMBAI-400 614

Signature of applicant

Tel: 022-27579924-27 **Fax:** 022-27577351 **E-mail:** nsci@giasbm01.vsnl.net.in **Web-Site:** www.nsc.org.in

* Entrance Fee forms the corpus of the Council
NSC/MEMFORM/1000/MAR2006)