



British Indian Psychiatric Association

BIPA MEMBERSHIP FORM

Name:

Mailing Address:

.

eMail:

Tel No:

Grade/Post:

University of Graduation:

Year of Graduation:

GMC / Registration Number:

Area of Speciality:

I wish to become a (tick the one applicable) – see the details at www.bipa.org.uk

Life Member £175 one off	Annual Member £40 yearly	Associate Life Member £175 one off	Associate Annual Member £40 yearly
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Please find enclosed a cheque for £ payable to "British Indian Psychiatric Association" and a standing order for subsequent years, where appropriate.

Signature & Date

Please send the completed form to:

Dr Seshagiri Rao Nimmagadda, Thornford Park, Crookham Hill, Thatcham, Berkshire, RG19 8ET

eMail : snimmagadda@doctors.org.uk

For updated information please consult BIPA website www.bipa.org.uk