



NEUROLOGICAL SURGEONS SOCIETY OF INDIA

Application form for inviting Annual Conference of NSSI

Year for Inviting.....Place of Organization.....
Name of Institute.....
Proposed Dates for Conference.....

Name of Proposed **Organizing President** inviting the conference.....
Membership No.Year of Membership.....
Address.....
.....Pin code.....
Telephone No.....Mobile.....
Email.....

Name of Proposed **Organizing Secretary**
Membership No.Year of Membership.....
Address.....
.....Pin code.....
Telephone No.....Mobile.....
Email.....

Name of Proposed **Organizing Treasurer**
Membership No.Year of Membership.....
Address.....
.....Pin code.....
Telephone No.....Mobile.....
Email.....

PROPOSED ORGANIZING COMMITTEE

S.NO	NAME	POST IN ORGANIZING COMMITTEE	MEMBERSHIP NO	SIGNATURE OF MEMBER
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

Detail of Venue *Name of Venue*.....
 2 No. of Conference Halls.....
 3 Seating Capacity of Conference Halls.....
 4 Space for Posters.....
 5 Space for Trade Exhibitions.....
 6 Audio and Video Facilities.....
 7 Computers for Preview.....
 8 Space or Desk for NSSI office at registration counter.....

We declare that the above mention information are true and correct in our knowledge. We are **members** of this Neurological Surgeons’ Society of India and our names are entered in the **electoral roll** of Neurological Surgeons’ Society of India. We append our signatures below. We hereby give our consent for willingness to organizing the proposed Annual Conference according to the constitution and bylaws of Neurological Surgeons’ Society of India after duly allotted the above said annual conference.

Signature
 (Organizing President)

Signature
 (Organizing Secretary)

Signature
 (Organizing Treasurer)

For Office Use