



Pakistan Society of Haematology

HELPING TO PROMOTE INFORMATION ABOUT BLOOD DISEASES

MEMBERSHIP FORM

1. Name: _____

2. Date of Birth: _____

3. Address:

a) Home: _____

Telephone: _____ Mobile: _____

b) Business: _____

Telephone: _____ Mobile: _____

Email: _____ Fax: _____

Address to be used for correspondence Home Business

4. Academic Qualification with Dates (not honorary, Please attach photocopy):-

a) _____

b) _____

c) _____

5. Current Professional Position:

Date: _____

Signature: _____

6. Name of Signature of Supporting Member:

Date: _____

Signature: _____

❖ Please enclose two copies of passport size photograph.

✓ Registration Fee: Rs: 100	Annual renewal: <input type="radio"/> Junior Member	Rs.300/year
	<input type="radio"/> Regular Member	Rs.600/year
	<input type="radio"/> Life Member	Rs.6000 once only
	<input type="radio"/> Corporate Member	Rs.5000/year

Please send pay order or Bank draft in the name of: **"Pakistan Society of Haematology"**

CORRESPONDENCE

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