



NEPAL ASTRONOMICAL SOCIETY
Lalitpur, Nepal

APPLICATION FORM

(Type writing or Block letter)

Attach in this place a recent passport size photograph and sent one auto size photograph for membership card

For Official Use Only

Application received on _____ Membership granted on _____ Registration No. _____ Membership class _____		Membership granted/not granted Reasons for not granting:-	
Renewal Date	Renewed up to	Bill No.	Signature

To
The Chairman
Nepal Astronomical Society, Lalitpur
Nepal

I, the undersigned, hereby apply for admission to Life Membership/Membership/Associate Membership/Junior Membership/Affiliate Membership of the Nepal Astronomical Society, and promise to abide by the Constitution and By-Laws of the Society as now formed, or as they may be hereafter legally altered.

Particulars regarding my education, experience etc. are as follows:

A. PERSONAL DATA

i) Name (in block Letters)

Surname

Name

ii) Date of Birth iii) Place of Birth

Day/Month/Year

Place/Country

iv) Nationality at Birthv) Present Nationality

vi) Address

Office..... Tel

..... Fax.....

E-mail

Home Tel

..... E-mail

vii) Blood Group (Optional) :.....

(Tick mark in box indicates preferred address for mailing)

B. EDUCATION

Name of the institution	Period of Study		Degree Obtained	Major field of study
	From	To		
	Month/Year	Month/Year		

I certify that the statements made by me herewith are complete and true to the best of my knowledge I understand that any willful misstatement renders me liable to expulsion even if admitted to the society.

.....
Signature

.....
Place

.....
Date

C. PROFESSIONAL EXPERIENCES

D. SPONSORS

Name of the Sponsors	Professional position and Organization	Society Membership Class and No.	Signature & Date
1.			
2.			

By the decision of the Executive Office.....is being granted the Membership of the Nepal Astronomical Society from the date s/he pays the necessary fees.

Date:

Chairman/Secretary