

# INTERVENTIONAL CARDIOLOGY COUNCIL OF KERALA (ICCK)

## Application for Life Membership

Name (Use Block Letters) :

Age :

Date of Birth :

Address :

Office	Residence

Telephone (Landline) :

Mobile :

E-Mail :

Qualification :

Degree	Year	University

Place of work in Kerala :

Experience in Intervention : (Please attach separate sheets if space is not sufficient)

Coronary

Non Coronary

Membership / fellow of other societies

Publication / Research

Eligibility Criteria

1. DM / DNB (Cardio):

Membership fee Rs.1000/- by Cheque/DD in favour of **Interventional Cardiology Council of Kerala** payable at Trivandrum.

Signature

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**For Office Use**

Date of receipt of application :

Recommended by the committee :

Membership Number :