



**INDIAN PSYCHIATRIC SOCIETY- SOUTH ZONAL BRANCH**  
**Membership Application Form**

photo

- Note: 1. ONLY IPS (National) members (LF/LOM) with membership number can apply**  
**2. Use net banking or direct payment through any branch of Corporation bankl (detailsbelow)**  
**3. Membership fee onetime payment of Rs. 2000/- (Rupees two thousand only)**  
**4. Send the filled application form with a copy of national membership certificate, PG (Psy) Certificate, payment receipt and a passport size photo to Treasurer by speed post.**

1. Full Name (in block letters): \_\_\_\_\_
2. Sex: M/F Age: \_\_\_\_\_ Professional qualification(s): \_\_\_\_\_
3. Mailing Address (in block letters): \_\_\_\_\_
4. State \_\_\_\_\_ MIC No: \_\_\_\_\_ Land Line: \_\_\_\_\_
5. Whatapp Number: \_\_\_\_\_ Email \_\_\_\_\_
6. Permanent Address: \_\_\_\_\_  
\_\_\_\_\_ Pin: \_\_\_\_\_
6. IPS (National) membership: (Life Fellow/LOM) No: \_\_\_\_\_ (Mandatory)  
Proposed by \_\_\_\_\_ IPS LF No. \_\_\_\_\_ Signature \_\_\_\_\_

(Only National IPS Life Fellow Members can propose)

**For Office Use:**

Signature of Applicant

**Payment Details:**

**Bank:**

**Date:**

UTR/NEFT reference number:

Remarks if any:

Hony. Treasurer

Hony. Secretary

President/Presiding officer of EC

**Bank Details:**

**A/C Name:** Indian Psychiatric Society South Zonal Branch

**A/C No:** 520 101 0071 60743 **IFSC code:** UBIN0920193

**Address:** Union Bank, Mehdipatnam branch, #9-4-84/9, Kakatyanagar, Hyderabad

**Send to:** Dr. Arunkumar N, Hon.Treasurer , IPS South zone branch, ATHMA Hospitals,  
12-B,10<sup>th</sup> Cross East ,Thillai Nagar,Trichy-620018, Mobile: 99449 64102, Email:  
[drarunkumar@athmahospitals.com](mailto:drarunkumar@athmahospitals.com)



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IPS SZ NEW MEMBERSHIP PAYMENT MODE

ONLY IPS LIFE (LF/LOM) MEMBERS WITH ALLOTTED NUMBER ARE ELIGIBLE FOR MEMBERSHIP

Step - 1.

Please make the payment of Rs. 2000/- by online transfer or deposit into the corporation account and share the details of payment with the application form.

Bank details

**Bank Details:**

**A/C Name:** Indian Psychiatric Society South Zonal Branch

**A/C No:** 520 101 0071 60743 **IFSC code:** UBIN0920193

**Address:** Union Bank, Mehdipatnam branch, #9-4-84/9, Kakatiyanagar, Hyderabad

Step-2

After payment, immediately send the following along with the filled application to treasurer by speed/reg. post.

1. One recent passport size photo
2. Payment receipt/details
3. IPS national membership certificate
4. PG certificate
5. ONE PASS PORT SIZE PHOTO (only one)

Treasurer's Contact details:

Dr. Arunkumar N  
Hon.Treasurer IPS South zone Branch  
Athma hospitals,  
12-B,10<sup>th</sup> Cross East,  
Thillai Nagar,  
Trichy-620018  
Mobile: 99449 64102  
Email: [drarunkumar@athmahospitals.com](mailto:drarunkumar@athmahospitals.com)

**Send to:** Dr. Arunkumar N, Hon.Treasurer , IPS South zone branch, ATHMA Hospitals,  
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