



THE MATHEMATICS CONSORTIUM

43/16, Gunadhar Bangalow, Erandavane, Pune 411004, India

Regd. No.: Maha/562/2016/Pune

E-mail: themathconsortium@gmail.com

Application Form For Associate Membership

Name : _____

Date of Birth : _____

Designation : _____

Address (Official) : _____

Phone : _____ **Mobile** : _____

Email : _____

Address (Residential) : _____

Phone No : _____

Qualifications : _____

Details of Research Publications : _____

Areas of Interest : _____

Type of Membership : **Associate member: Rs. 1000/- (For 10 years)**

Any other Details : _____

The Amount should be deposited to:

Kotak Mahindra Bank
M-4, Virwani Plaza, 11 East Street, Lotus Rd, Camp,
Account Number: **9412331450** (The Mathematics Consortium)
IFSC Code: **KKBK0000721**
East Street Branch, Pune, Maharashtra 411001, INDIA

Date

Signature

Address for Correspondence C/o Bhaskaracharya Pratishthan
56/14, Erandavane, Damle Path, Off Law College Road, Pune-411004