Indian Dental Association
Committed to Dental Excellence

Photo

Signature

Application for Student Membership

Please complete this application form legibly in all respects, using capital letters.

General Information

Title | First Name | Middle Name | Last Name

Personal Information

Date of Birth (dd/mm/yy) | Sex M ☐ F ☐ | Blood Group

Mailing Address

(Please indicate preference of mailing address) 1 ☐ 2 ☐

1. Residential Address

Address

Area | City ☐ Dist. ☐ | Taluka | Pin Code

State | Tel. No.

Cell Number

Email Address
1 | 2

2. College Address

Name of the Institute | Address (Line-1)

Address (Line-2)

Area | City | Pin Code

State | Tel. No.

Tele - Fax | Email address

Studying in Year

Principal's Signature & Stamp

Subscription

(NOTE: GST 18% included in Membership Fee)

Student Year	Student Fee	GST @ 18%	Total Student Fee
For 1 year	300	54	354
For 2 years	600	108	708
For 3 years	900	162	1062
For 4 years	1200	216	1416
For 5 years	1500	270	1770

Cheque / DD Number | Dated(dd/mm/yy) | Bank

* Enrolment / Renewals can be made either at IDA HO / State / Local Branches.
* Outstation Payment to be made by DD / Credit Card Only.

Declaration

I declare that I have read through the details of the IDA Application Form, the Constitution, Bye- Laws, Code of Ethics & Professional Conduct & resolve to abide by them. I am not a member of any association functioning parallel to IDA in my area & have not been convicted by any court of law (This does not include specialty societies). I am not engaged in any activity detrimental to the interest of any association. The information provided by me is true & I hereby submit my application for membership to IDA.

Applicant's Signature _____ Date _____

Pls. Note: Undergraduate students of Dental Institution recognized by D.C.I. shall be admitted as student members. Such members shall have right to attend scientific meetings, lectures and demonstrations but shall have no right in the working of the association.

Office Use only

IDA HO Address

Indian Dental Association, Head Office,
3rd Floor, Unit No. 3 A+B, Zone 1
DGP House, 88-C,
Old Prabhadevi Road,
Prabhadevi, Mumbai – 400025
Tele No. 022 - 43434545
Email: membership@ida.org.in

State Branch Address

Local Branch Address