

# Light of Science

**Jalpaiguri**

Affiliation under *Breakthrough Science Society*

Regd. No. – 53166/92

## APPLICATION FOR MEMBERSHIP / RENEWAL

To  
The President  
Light of Science  
Jalpaiguri

Sir,

*I agree to accept the Constitution\* and other rules of Light of Science and would like to be enrolled as a Member/ renew my membership of the organization. The particulars are given below.*

Date:.....

Yours sincerely,

Place:.....

(signature of the applicant)

(Please use capital letters only, Strike out whichever is not applicable)

1. Name of the applicant : .....
2. Residential Address : .....  
Postal Code : .....; District : .....
3. Date of Birth : .....; Sex : .....
4. Contact No.:.....; Email:.....
5. Educational Qualification : .....
6. Profession : .....; Designation : .....
7. Institute/Office (If any).....
8. Membership No. : .....; Duration of Membership : .....

\* "Constitution" is referred to the constitution of *Breakthrough Science Society*.

### The Words of Oath

*I solemnly declare that I shall try my best to uphold ethical and social responsibility in my pursuit of Science. I shall never participate in those application of science and related research that are to my knowledge conducted for the destruction of science and humanity. I shall always be guided by scientific outlook and culture in my thinking and practice and inspire others around me to create and promote a scientific culture in the society.*

\_\_\_\_\_  
Signature of President

\_\_\_\_\_  
Signature of Applicant

(Please use capital letters only, Strike out whichever is not applicable)

1. Name of the applicant : .....
2. Residential Address : .....  
Postal Code : .....; District : .....; Nationality : .....
3. Membership No. : .....
4. Duration of Membership : .....

\_\_\_\_\_  
Signature of President

\_\_\_\_\_  
Signature of Applicant