

Light Of Science

Jalpaiguri

Affiliated to **BREAKTHROUGH SCIENCE SOCIETY** (Affiliation No. 53166/92)

Website: LightOfScience.tk

Email: LightOfScience@outlook.com

APPLICATION FOR MEMBERSHIP/ RENEWAL OF MEMBERSHIP

To
The President
Light Of Science
Jalpaiguri

Dear Sir,

I agree to abide by the Constitution and other rules and regulations of "Light Of Science" and would like to be enrolled as a Member/ renew my membership of the organization.*

Yours sincerely,

Date:

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 : Male / Female/ Other
4. Contact No.: +91/ +91; Email: @
5. Educational Qualification :
6. Profession:; Designation:
7. Institute/Office (If any).....
8. Membership No. (for renewal) :; Duration of Membership (for renewal):

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 promoted a scientific culture in the society."

Date:

Place:

(signature of the applicant)

✂ - - - - -

Received with thanks from Rs. as Annual Membership Fee/ Renewal of Membership of Light of Science.

Membership No.; **Subscription Duration:**

.....
Signature of the Applicant

Received by:
Date: