



## Membership Application Form

### All India Difficult Airway Association (Founded in 2010)

Name : \_\_\_\_\_  
Surname : \_\_\_\_\_  
Address : \_\_\_\_\_  
City : \_\_\_\_\_ Pin code: \_\_\_\_\_  
State : \_\_\_\_\_ Country: \_\_\_\_\_  
Email ID : \_\_\_\_\_ Contact No: \_\_\_\_\_  
Medical Registration no and Date : \_\_\_\_\_ ISA Membership NO: \_\_\_\_\_  
Qualifications : \_\_\_\_\_ Specialty: \_\_\_\_\_  
Designation and workspace : \_\_\_\_\_  
Place : \_\_\_\_\_ Date: \_\_\_\_\_  
Proposed By : \_\_\_\_\_ Membership No: \_\_\_\_\_

#### **Bank Details:**

Life Membership Fee: \_\_\_\_\_ UTR/Transaction No: \_\_\_\_\_ Dated: \_\_\_\_\_  
Name of the Bank: \_\_\_\_\_ Branch: \_\_\_\_\_ City: \_\_\_\_\_

#### **All INDIA DIFFICULT AIRWAY ASSO (AIDAA)**

**Account No:** 50200029010991 **IFSC Code:** HDFC0004012

Life Membership registration fee: **Rs.5500/- (rupees five thousand five hundred only) (inclusive of GST)** to be paid by UPI/NEFT/IMPS in favour of "All India Difficult Airway Association "payable at Mangalore.

- Please email soft copy of dully filled form, payment confirmation, passport size photograph, qualifications certificate
- Medical council registration and adhar card to email I'd aidaa.aidaa2010@gmail.com

#### **Please mail the duly filed application form to:**

Dr. Amit Shah  
General Secretary, AIDAA (All India Difficult Airway Association)  
Consultant anaesthesiologist (Department of Anaesthesia)  
Kailash Cancer Hospital & Research Center, Muni Seva Ashram, Goraj  
**Address for correspondence** : 12/a , Gokul Society, Sindhwaimita Road, Pratapnagar, Vadodara 390004.

#### **Contact us:**

**Email:** [aidaa.aidaa2010@gmail.com](mailto:aidaa.aidaa2010@gmail.com)

**Telephone:** +91 9099011061 (Dr. Amit Shah) **Website:** [www.aidaa.in](http://www.aidaa.in)