



TNGDA

Tamilnadu Government Doctors Association

Membership Form

(Tick the relevant Box & fill the Form with capital Letters)

New Enrollment Renewal / Data Updation & New ID Card Request

1.	Name	:	
2.	Qualification	:	
3.	Date of Birth	:	
4.	TN Medical Council Reg No:		
5.	Contact Cell No	:	
6.	E.Mail ID	:	
7.	Residential Address	:	
8.	Designation	:	
9.	Working Place / Office Address	:	
10.	District	:	
11.	TNGDA Membership ID No:		(for old members ,if available)
12.	<p style="text-align: center;"><u>Declaration:</u></p> <p>I hereby apply for the # New Member # Renewal / data updation and new ID Card. I assure that I will abide by the rules and bylaws of TNGDA.</p> <p>Date :</p> <div style="border: 1px solid blue; border-radius: 15px; width: 300px; height: 40px; margin: 10px auto;"></div> <p style="text-align: center;"><i>Signature of the Applicant</i></p>		<p style="text-align: center;">Paste Passport size Photo</p>
13.	Forwarded by		
	Date: District President / Secretary		

* Print with A4 Size Sheet. Submit this application form with the district office bearers. details available @ www.tngda.org. Enrollment will be done under the above requested district head. In future you can transfer the district head with proper request. Get receipt for paid fees.

QR Code to Download this Form Link →

