



# MEMBERSHIP FORM

## Who can be a member of “Vitiligo Society, Manipur”

Any adult (above 25 years of age) and permanent citizen of Manipur, with a sound mind with no criminal records with the following qualifications can be regular member of the Society.

1. All Dermatologist, any medical professionals and allied science graduates, of the State.
2. All Vitiligo sufferers with a minimum graduate qualification.
3. Any educated (graduates and above), who is voluntarily willing to contribute their knowledge, skill and selfless services towards the objectives of the Society.
4. All the invited Vitiligo sufferers, doctors and invitees present on the launching function of the Society, on “World Vitiligo Day” 25<sup>th</sup> June 2019, will be treated as founder members of the Society (if anyone is not opting out of the membership for any reason of his or her).

\* All less qualified or uneducated Vitiligo sufferer can be an Associate member of the Society.

The following details to be submitted:

Name \_\_\_\_\_

Age \_\_\_\_\_ Sex \_\_\_\_\_

Full residential address \_\_\_\_\_

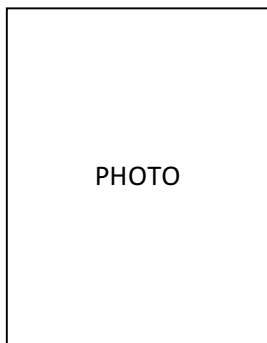
Qualifications \_\_\_\_\_

Contact no \_\_\_\_\_ Email id \_\_\_\_\_

I am a Vitiligo sufferer: a) Self: Yes / No

b) Family member suffering: Yes / No

- \* I solemnly pledged that I will work, contribute my knowledge, skill, services without any reservation and personal (self) benefits or bias feelings towards the objectives of the Society to alleviate the sufferings of the Vitiligo sufferers and to uplift/remove the Psycho Social issues relevant to Vitiligo. My primary endeavour will be remove the discrimination and prejudice against Vitiligo in the Society.
- \* I am submitting a self-attested copy of my photo ID proof with a passport copy of my recent photo.
- \* If a Vitiligo sufferer, are you willing to be identified publicly as a Vitiligo sufferer? Yes( ) or No( ). Please reproduce your reply.
- \* In due course, when the Society is registered under the Society registration Act, Manipur, I will abide by the Act/Rules and By Laws of the Society.
- \* I submit myself to be a regular member/Associate member of the Society.



**Signature:**

**Dated:**

**Full name:**