

A Project of Association of Family Physicians Pakistan (Regd) SECP Registration No: 0066321 {Under Section 42 of the Companies Ordinance 1984 (XLVII of 1984)}

## ASSOCIATE MEMBERSHIP

Application for the Membership of PAFP for Medical Students (3rd, 4th & Final Year)

Please use CAPITAL LETTERS		
Name :		
Father/Husband Name :		Photo
Postal Address :		
Institute and year of Studies :		
CNIC No :	Email :	
Tel Res :	Mob :	
Please send completed form to the following address alo a. Bonafied Certificate of year of Study from respected Institu b. 2 Passport Size Photos c. Copy of CNIC d. Membership fee Rs. 3000/- may be paid by Online/Cash/Cross Cheque/Bank Draft in fax For Online Payments: United Bank Limited, IBAN I or	vour of Academy of Family Physicians Pakistan	
For Office Use Only	Cheque Draft Number :	
CASH	Drawn on Bank : Dated : Comments :	

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