



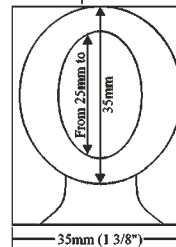
# International Council of Ayurvedic Physicians Inc. (ICAP)

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Photo Specification



## MEMBERSHIP FORM (ONLY CAPITAL LETTERS)

Suffix : \_\_\_\_\_ First Name : \_\_\_\_\_ Middle Initial : \_\_\_\_\_ Last Name : \_\_\_\_\_

Degrees / Diplomas / Certificates \_\_\_\_\_ Occupation : \_\_\_\_\_

Company Name : \_\_\_\_\_

Office Address : \_\_\_\_\_

City : \_\_\_\_\_ State / Province : \_\_\_\_\_ Postal Code : \_\_\_\_\_ Country : \_\_\_\_\_

Phone : \_\_\_\_\_ Fax : \_\_\_\_\_ E-mail : \_\_\_\_\_

Residential Address : \_\_\_\_\_

City : \_\_\_\_\_ State / Province : \_\_\_\_\_ Postal Code : \_\_\_\_\_ Country : \_\_\_\_\_

Phone : \_\_\_\_\_ Fax : \_\_\_\_\_ E-mail : \_\_\_\_\_

Website(s) : \_\_\_\_\_ Alternative E-mail : \_\_\_\_\_

How many years of Practice \_\_\_\_\_ Year(s)

Name of the Organization you are/were working for : \_\_\_\_\_

or if you are a student Number of Years / Semesters of course completed : \_\_\_\_\_

please provide Name, Contact Info, and Address of your current Educational Institute (below)

ADDRESS \_\_\_\_\_

CONTACT INFO. (TEL / FAX / EMAIL / WEBSITE) \_\_\_\_\_

Date of Birth : \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Current Date : \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Signature : \_\_\_\_\_

### Membership Information / Payment (Canadian Dollars Only)

- ☐ Student : \$ 251 (1st Year only) ☐ Ordinary Member : \$ 375 (1st Year only) ☐ Senior Member : \$ 251 (1st Year only)  
☐ Life Member : \$ 10001 ☐ Patron Member : \$ 21001 ☐ HONORARY

Payments can be made by Demand Draft / Cheque / Cash only. Do not mail Cash. You are entitled to pay a Bank / Financial charges. Cheque / Demand Draft / Money Order should be drawn in the Name of "ICAP Inc."

**Check-list :** Put an "X" in the box corresponding to the documents you are enclosing. If you do not enclose all the required form and documents, your entire application will be returned to you. Supporting documents must be in English / Gujarati / Hindi / Sanskrit. If they are not, send a certified translation with a copy of the original.

- ☐ Copy of Certificate(s) ☐ Copy of Degree(s) ☐ Copy of Photo Identification(s)  
☐ Copy of Diplomas ☐ Three Current Passport Size Pictures (Note : Photo Specification on Top)  
(\* Police Clearance Certificate should be provided if requested)

Website : [www.icapinc.org](http://www.icapinc.org)

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