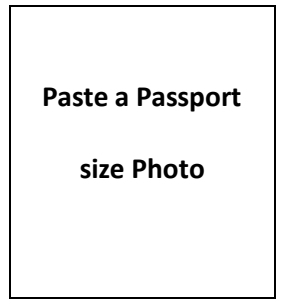


MEMBERSHIP FORM

Cooch Behar Association for Cultivation of Agricultural Sciences (COBACAS)

Name in block letter :
Designation/Position :
Affiliation :
Academic qualification :
Field of specialization :
Date of Birth :
Contact address :



Tel : E-mail :

Permanent address :

Tel : E-mail :

I/we hereby declare that the above statements are correct in all respects to the best of my knowledge and I abide the rules and regulations of the COBACAS. I am willing to take the membership of COBACAS in the following category (put \surd mark).

Life Member/Annual Member/Farmer Member/Honorary Member

Signature of the Application with date

Membership of COBACAS is open to all individuals/Institutions/Corporate interested in any aspects of agriculture and allied fields subjected to possession of required qualification as per the Memorandum of COBACAS. Members are entitled to voting privileges and receipts of publications of the COBACAS.

The membership fees are being given below:

- | | |
|----------------------------|---------------|
| i) Life Member | : Rs. 3000.00 |
| ii) Annual/Ordinary Member | : Rs. 500.00 |
| iii) Farmer Life Member | : Rs. 1000.00 |

Send the form to:

Secretary

Cooch Behar Association for Cultivation of Agricultural Sciences (COBACAS)

Department of Genetics and Plant Breeding, Uttar Banga Krishi Viswavidyalaya, Pundibari, Cooch Behar 736 165, West Bengal, INDIA or **mail to** cobacas2013@gmail.com