Updated: 12 June 2026

Academy of Public Health Entomology

Society Reg. no. coop/2019/Udaipur/101687

Membership Form

Personal information

Name:

Affiliation:

Mailing address with PIN code:

Permanent address:

Mob. no.: +91

E-mail: @

Educational qualifications:

Aadhar card no.:

Major field of professional expertise:

Membership applied (add 'YES' for your choice):

- **Life Membership – Rs. 4500 (valid for 10 yrs):**
- **Student Annual Membership – Rs 750:**

How to make payment of the fee:

- **Scan the QR/UPI Code on the next page and pay.**
- **Mandatory: While making the payment, mention your name in the "Add a note" section.**
- **Unable to pay via QR code, contact us at secretary@aphe.org.in to get our bank account details for the payment of the fee.**

Application submission:

- **E-mail the duly signed membership form to: secretary@aphe.org.in**
- **Attach a screenshot of the UPI transaction**
- **Insert your high-quality passport-size photo in the form or send it as an email attachment.**

Signature **Place:** **Date:**

Insert your photo below

Insert payment receipt below or send as an email attachment