



Centre for Heritage Studies (CenHerSt)

Regd. No. Bangladesh/IV-6/2015/Dinajpur

Office: Choto Gurgola, Dinajpur-5200

Email: contact@cenherst.org, cenherst@gmail.com

Facebook: fb.com/CenHerSt

STICK
YOUR PHOTO
HERE

Membership Application Form

Title **(Please Tick)**

Mr ☐ Ms ☐ Dr ☐

Name

Nationality

Date of Birth

Gender

Education

Membership Category Requested **(Please Tick)**

☐ Student ☐ General ☐ Life ☐ Institutional

If student please specify school, college or university

In Case of Institutional membership, please specify Name of Organization and enclose copy of: Registration Certificate, Memorandum of Association, Articles of Association, Annual Report/Account

Preferred Mailing Address

(ZIP / Post Code & Country Name)

Residential Address **(If differs from Mailing Address)**

(ZIP / Post Code & Country Name)

Profession

Institution

Home Phone

Mobile Phone

Office Phone

Fax

Email Address

Communication Preference **(Please Tick)**

☐ Fax ☐ Email ☐ Post ☐ Phone

Area of Interest

Assistance you can provide to the CenHerSt **(Please Tick)**

- ☐ Editing or writing publications ☐ Leading Study Trips ☐ Fund raising
- ☐ Organizing or conducting lectures and discussions ☐ Library
- ☐ Advising or promoting cultural heritage preservation
(for example, preservation of archaeological sites and monuments, traditional art or architecture, etc.)
- ☐ Advising or promoting natural heritage preservation
(for example, preservation of environment, forest, lakes, rivers, etc.)

Payment Method **(Please Tick)**

- ☐ Cash ☐ Cheque ☐ Bank transfer ☐ MasterCard ☐ Visa

Payment by Cheque

Please make the cheque payable to ***Centre for Heritage Studies Trust***

Cheque number: Bank name: Branch:

Payment By bank transfer

Transfer money to: "Centre for Heritage Studies Trust" Savings Account No..... Please attach the docket to your application.

Payment by Credit Card

Please charge a total amount of Taka to my credit card account.

Card number: 3 digit security code:

Card expiration date: Name as on card:

Signature as on card:

Signature of the Applicant with Date

Proposer

I recommend this applicant for membership in the CenHerSt.

Note: The proposer must be a member of the CenHerSt in good standing and must be satisfied regarding the applicant's integrity and suitability for membership.

Name of Proposer

Membership Number

Signature of Proposer with Date

General Information

For Computerization purposes, form must be filled in capital letters. Incomplete form is liable to be rejected.

Membership applications in all categories have to be approved by the Executive Committee.

The Executive Committee has the right to refuse membership without assigning reasons. The decisions of the Executive Committee shall be Final.

For Office Use Only

Received On

Enrolled On

Membership No

Category

Receipt No

Valid Until

Send your application either by email or by post.