



**KOSHISH**  
**MASTECTOMY ASSOCIATION OF INDIA-JAIPUR CHAPTER**  
**Society Registration No. 496**

Postal Address: Jwala Building, 1st Floor, C-21/A, Bhagwan Das Road, Jaipur, India  
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**LIFE MEMBERSHIP FORM**

Name: .....

Age: ..... Occupation: .....

Address: (Office) ..... Tel. No.: .....

(Residence) ..... Tel. No.: .....

Amount (Rs.): .....only

Mode of Payment (Cash / Cheque / DD) No.: ..... Dated: .....

Bank: .....

Signature

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**Centre of activities:** Star Cancer Rogi Seva Kendra, Radiotherapy Department, S.M.S. Hospital, Jaipur, India  
**Days:** Mondays to Fridays &nbsp; Time: 9.00 AM to 12.00 Noon (Summer) & 10.00 AM to 1.00 Noon (Winter)