

Information Retrieval Society of India Individual Membership Application Form

Mailing address: CVPR Unit Indian Statistical Institute 203 BT Road Kolkata 700 108. India.

APPLICATION FOR MEMBERSHIP

Mr./Ms.	First Name	Middle Name	La	ast Name		
			-			
Street Ac	ldress					
City	State	Country	,	Zip/Postal Code		
Home Phone			Email			
Occupatio	on					
Company	/Institution Name					
Business Phone			Busin	Business Email		
				Applicant's Signature and Date		
		For office use)			
Recomr	nended by:					
Second	ed by:					
Accepte	d as a regular / as	sociate member on:				