

First Name

I, Dr. _

Indian Hernia Society

Registration No: 63410/08 (Registered under Registration of Societies Act 1860)

NOMINATION FORM of Zone (City), Middle Name Last Name of Indian Hornia Society (Membership No.) and a member of

A bonafide member of Indian Hernia Society (Membership eligible to contest for any one of the following posts. I, her post of (Please tick one).	
President Elect (2023) (One year tenure)	
President Elect (2024) (One year tenure)	
Vice Presidents (2023) (One year tenure)	
North Zone	
East Zone	
South Zone	
West Zone	
Central Zone	
Hony Secretary (2023-2024) (1 Post)	
Hony Treasurer (2023-2024) (1 Post)	
Hony Joint Secretary (2023-2024) (1 Post)	
Board members	
1. (2023-2025) (Three years tenure)	
2. (2023-2025) (Three years tenure)	
3. (2023-2025) (Three years tenure)	
I shall abide by the rules & regulations of the Society of En	doscopic & Laparoscopic Surgeons of India.
Date	Signature
Address for correspondence	Full Name: Dr
Pin Code TEL	No
Email(Essential). Fax No	
Proposed by: Dr	Zone
First Name Middle Name Last Name Signature	
(IHS Membership No)	
Seconded by: Dr	Zone
First Name Middle Name Last Name	Signature
(IHS Membership No)

Address for sending the Nomination Form Prof. M.C. Misra

Email: mcmisra@gmail.com and secretary.ihs@gmail.com

The nomination form should reach the Election Commissioner on or before 11th September 2022.

The nomination can be sent to **Prof. M.C. Misra** by email also (Email id mcmisra@gmail.com) and secretary.ihs@gmail.com)