



## Coalition on Maternal-Neonatal Health and Safe Abortion

### Membership Application Form

Membership is extended to organizations and individuals that agree with the mission and objectives of the Coalition and are, or intend to be, active in promoting or supporting its work. Members will benefit from contributing to and learning from other Coalition members. Individual members do not need to have the formal backing of their organization, but organizations must designate a contact person.

Membership fee:

Membership type	1 yr	5 yrs
Individual	Rs. 200/-	Rs. 800/-
Institutional	Rs. 800/-	Rs. 3,200/-

Highlight or circle selected choices in bold and fill out where appropriate

1. Membership Type	Individual ( If yes, then please answer all)	Institution/ Organisation ( If yes, then please answer from 5 onwards)
2. Name		
3. Sex	Female	Male
4. Position		
5. Institution/ Organisation		
6. Street Address		
7. City		
8. Post Code		
9. State		
10. Telephone		
11. E-mail		

12. Experience in (✓ whatever is appropriate)	Advocacy	Research	Services	Training	Policy
Maternal health					
Neonatal health					
Safe abortion					
Gender					
Rights					
Community level work					
Other (specify)					
13. Please give the name of a Coalition member as reference.					
14. Can we give your details to other members for networking?				Yes	No
<u>For Individual Membership</u> - Kindly send your CV along with this form					
<u>For Institutional membership</u> – Kindly send your official brochure or Memorandum of Association/Objectives					
<i>I support CommonHealth's mission and objectives</i>					
Signature:			Date:		

Please complete this form, and scan and email to [cmnhsa@gmail.com](mailto:cmnhsa@gmail.com)

**Or**

Please send the completed form to:

CommonHealth Secretariat, C/O Centre for Enquiry into Health and Allied Themes (Cehat),  
Survey No. 2804 & 2805, Aram Society Road, Vakola, Santacruz (east), Mumbai-400055,  
Phone: +91-22-2667 3154 / 2667 3571

Membership fees can be deposited in -

Account name - Rural Women's Social Education Centre;

Name of Bank & Branch - State Bank of India, Chengalpattu;

Bank address - State Bank of India, Varada Reddy Street, Vedhachalam Nagar, Near New Bus Stand, Chengalpattu – 603 001. Tamil Nadu

Bank Account Number 3 0 7 2 5 4 2 6 4 6 5; Bank IFSC Code S B I N 0 0 0 0 8 2 4