



DERMATOLOGICAL SOCIETY OF THAILAND

Office: Royal Golden Jubilee Bulilding (9th Floor) 2 Soi Soonvijai, New Petchburi Road, Bangkok. Huaykwang, Bangkok 10310 Thailand
Tel. +66-2716-6857, +66-2716-5256, +66-2716-6661-3 ext. 9012; Fax +66-2716-6857
website: www.dst.or.th; email: contact@dst.or.th

International Affiliate Membership Application Form

Date

Name (Block letter).....Surname.....

Birthday.....Age.....

Medical License Number (Your country).....

Mobile Phone Number (Including country code).....

E-mail Address

Home Address (Street, Subdistrict, District, Province, Zip Code, Country).....

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Office Address (Department, Clinic, Hospital, Street, Subdistrict, District, Province, Zip Code, Country)

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Qualifications

1. Medical Degree (MD, MBBS, etc.) from Year

2. Diplomate Board of Dermatology fromYear

3. Dermatology training atYear

Work experience in dermatology (including duration years active)

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Dues THB 3,100 (USD 120) per 3 years

Payment methods

- Cash
- Foreign bank draft payable to "Dermatological Society of Thailand"
- International money transfer to "Dermatological Society of Thailand", Savings account, Siam Commercial Bank, Rajvithi Hospital branch, Swift code: SICOTHBK, Account number 051-2-389330

Documents for Application

1. Photocopy of passport or identity card
2. Photocopy of medical license in your country, including a general medical council registration number (medical license number) and an English translation if applicable
3. Photocopy of medical degree (MD, MBBS, etc.), including an English translation if applicable
4. Color photograph, size 2x2 inches

Please send all documents to the Dermatological Society of Thailand (DST) by mail.

I hereby agree to abide by the regulations of the Dermatological Society of Thailand.

Signature.....

(.....)

Date

We the undersigned, ordinary members of the Dermatological Society of Thailand, testify that the above named, who is personally known to us, is in every way a suitable candidate for election.

Proposer

Name:

Signed:

Date: