Pakistan Physical Therapy Association

Membership Application

DEAR APPLICANT: Please visit our website for membership criteria and details at www.pakpta.org

A Personal Information

First Name | Middle Name | Last Name

CNIC No. - -

Date of Birth (DD-MM-YYYY) - -

Gender

☐ Male ☐ Female

Work Address

Home Address

Preferred Mailing Address

☐ Work ☐ Home

Telephone

Mobile -

Work -

Home -

E-mail Address

B Qualification

Name of College/School/Institution of Physical Therapy Education with Address

Name of the Degree Awarding University (Must be Recognized & Approved by HEC Pakistan)

Name of the Degree

- ☐ Student
- ☐ BSc/BSPT
- ☐ MSc/MSPT
- ☐ Entry Level DPT (Doctor of Physical Therapy)
- ☐ M.Phil
- ☐ Post Professional DPT (tDPT)

Date of Graduation (DD-MM-YYYY)

		-			-				

(Students: Expected Date of Graduation)

C Oath

☐ I solemnly declare that as a student member of PPTA, I will follow the code of ethics & standards of constitution of the association laid by the Central Executive Committee of PPTA from time to time.

☐ As a Physical Therapist member of PPTA, I will comply by the code of ethics and charter of constitution of the association laid by the Central Executive Committee of PPTA from time to time.

Signature

Date (DD-MM-YYYY)

		-			-				

For Student Applicants Only

Student members should get their forms attested from the institution/supervisor/program director with official seal & stamp.

Name of Attesting Authority

Designation

Signature

Official Stamp

D Membership Fee

☐ Physical Therapist Member PKR 2000/- (Annual) ☐ Student Member PKR 500/- (Annual)

Please send the filled form and attested copies of your supporting documents along with the demand draft of membership fee payable to Pakistan Physical Therapy Association Islamabad at the following address:

General Secretary - Pakistan Physical Therapy Association
Room # 16, Plot # 1, St # 30, Family Health Hospital, I-10/4, Islamabad, Pakistan.
Tel: +92-51-5384890