

**Subscription Form of Journal of Health Sciences and Medical Research**

Frequency : Half Yearly

Subscription Packages				
Year(s)	No. of Issues	Print Version	Digital Version	Print+Digital
		By Courier / Regd. Post		
One Year	2	₹ 4000.00	₹ 4200.00	₹ 4200.00
Three Years	6	₹ 9000.00	₹ 10000.00	₹ 10000.00

Please tick out the subscription Period

One Year

Three Years

Subscriber's Name: \_\_\_\_\_

Company Name (if any): \_\_\_\_\_

Designation (if any): \_\_\_\_\_

Postal Address: \_\_\_\_\_

City: Pin Code: State: Country:

Address Point:

Office

Residence

Telephone No. (O): \_\_\_\_\_ Telephone No. (R): \_\_\_\_\_

Mobile No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website (if): \_\_\_\_\_

Enclosed please find cheque / DD drawn in favour of "Magazine Communications Private Limited" Payable at New Delhi.

Cheque / DD No.: \_\_\_\_\_ Dated: \_\_\_\_\_

Drawn on (Name of Bank): \_\_\_\_\_ Amount (in figures): \_\_\_\_\_

Drawn on (Name of Bank): \_\_\_\_\_

Sender's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Bank Account Details For NEFT :**

**Name Of Account :** Magazine Communications Private Limited | **Name Of Bank :** State Bank of India | **Bank**

**Account Number :** 30887529699 | **Type of Account :** Current | **Branch Code :** 07085 | **RTGS / NEFT IFS Code :** SBIN0007085 |

**Address of Bank Branch :** Swasthay Vihar, 9, Rajdhani Enclave, Delhi - 110092

Please send the filled subscription form with payment to :

**Subscription Cell**

**Magazine Communications Private Limited**

216, Second Floor, Bhagwati Business Centre

S-565, School Block, Shakarpur

Delhi - 110092

Phone : 011 45657426 | 92 666 444 93 | Time : Monday To Friday 10:00 AM to 7:00 PM

E-mail : magazine@mcplteam.com | Website : www.magazinesubscriptions.in

M/S.MAGAZINE COMMUNICATIONS  
PRIVATE LIMITED  
Scan and Pay



UPI ID - MSMAGAZINECOMM\_@sbi

**BHIM UPI**

Mobile Pay | e₹ | G Pay | CRED