

# 2<sup>nd</sup> December 2018 Hotel The Lalit, Delhi

Signature

## "PURSUIT OF EXCELLENCE IN EVIDENCE BASED MEDICINE"

### **REGISTRATION FORM**

Please Fill in <b>BLOCK LETTER</b> (*It is important that you provide an ema		communications can be	sent to you via S	SMS/ e-mail)
Title: Prof. ☐ Dr. ☐ Mr. ☐ I	Ms.□ Mrs.□	Gender:	Male □	Female□
First Name*:	Middle Name: L		st Name:	
Institute/ Hospital:		Designation:		
Postal Address:				
		City:		
State:	Pin:	Country:		
IPF Membership No.*:	Phone (Off):			
Phone (Res):	Mobile*:			
E-mail*:				
REGISTRATION FEE (Tick the amount which is application)	able & enclose)			* Mandatory for Registratio
1 <sup>st</sup> Sep,-15 <sup>st</sup> Nov, 2018	16 <sup>th</sup> Nov,-1 <sup>st</sup> Dec	c, 2018	On-spot	
Members ₹ 3000 □	₹ 4000		₹ 5000 □	
₹ 4000	₹ 5000		₹ 6000 □	
* <b>PG Students</b> ₹ 1500	₹ 1500		₹ 150	00 🗆
I am enclosing herewith a Ch	eque/ Demand Draft no		dated	<u>/</u> /
of Rs (in wo	ords:			) only
drawn on bank		in favour of "Inn	ovative Phy	sicians Forum"
payable at Delhi.				

#### Bank Details of IPF MEDICON 2018:

Account Name: Innovative Physicians Forum®

IFSC CODE: BKID0006010

Rajendra Place, New Delhi-110008 Branch:

A/C No: **601020110000671** Name of Bank: Bank of India

### REGISTRATION GUIDELINES

- IPF membership number is mandatory for registration in membership category.
- Online charges will be applicable at 3% of the total amount.
- Registration fees include admission to the scientific halls, trade exhibition, inaugural function, lunch and delegate kit.
- Provide us your updated email id & mobile number. As it will be used for the registration receipt and other conference communication.
- Organizing committee shall not be liable in any form in case of changes in date / venue due to unforeseen reasons.
- Conference organizers are not responsible for postal delays / failure of delivery by post or failure of electronic communication.
- It is mandatory for all delegates to carry there photo id (government approved) for smooth registration procedure.
- \*It is mandatory to submit HOD Letter/ PG certificate to avail the registration in PG category.

#### **CANCELLATION & REFUND**

- Requests for cancellation for refunds must be made in writing or through e-mail.
- Request must be sent to conference secretariat.
  - E-mail: iphysiciansforum@gmail.com
- No refund of registration fee will be provided for cancellation request received after 15th november 2018.
- 50% of the registration would be deducted as processing charges and rest will be refunded one month after conference completion.

Please send duly filled Registration form along with Cheque or DD in favour of "Innovative Physicians Forum" payable at Delhi to:

> Receipt No.: Registration No.:

For office use only



#### **CONFERENCE SECRETARIAT:**

Dr. J.K. Sharma (Organising Secretary) Central Delhi Diabetes Centre 34/34,GF, Old Rajinder Nagar, New Delhi- 110060

Mob: +91 9810002115

E-mail: iphysiciansforum@gmail.com Web: www.iphysiciansforum.com



Professional conference organisers F-8, 2nd Floor, Kalkaji Main Market,

Delhi 110019 For Registration Query Contact: Mr Shekhar Srivastava

Tel.: +91 9821259003 E-mail: operations@concepttc.com