

Registration Form

Date _____

(Fill Form In Capital Letters)

Personal Details :

Surname: _____		First Name: _____	
Telephone No: _____		Mobile No.: _____	
Age: _____	Gender: M <input type="checkbox"/> F <input type="checkbox"/>	Email : _____	
Designation: _____		MMC Reg. No.: _____	Membership No.: _____
Institute : _____			
Address For Communication : _____			

Conference Fees :

Category	Early Bird (15th Jan - 30 th April)	Regular 1st May - 31 st Aug	Spot 1 st Sept. on wards
Work Shop (7th Sep)	Rs. 2,500	Rs. 3,500	N.A.
Two days conference 8th & 9th sep	Rs. 7,000	Rs. 10,000	Rs.12,000
Pediatric & Adolescent obesity 8th sep (One day only)	Rs. 3,000* (+ 18% GST)	Rs. 3,000* (+ 18% GST)	N.A.
P.G Student* 8th sep (one day only)	Rs. 2,000* (+ 18% GST)	Rs. 2,500* (+ 18% GST)	N.A.

Please note

- Workshop is only for 100 delegates. (On first come first basis)
- ID cards & HOD certificate to be submitted while registration for PG students.*
- Please note that it is essential to have a functional email ID and mobile no. as all communication regarding your registration shall be done by email & SMS only.

* Banquet Charges
Extra

Payment Method :

Delegates who wish to pay by NEFT/ DD, draw the same in favor of "ASSO FOR ADVANCING RESCH IN OBESITY AIAAROCON 2018" payable at Aurangabad. Send it along with duly filled registration form to the conference secretariat address.

Bank Details :

Bank Name	Saraswat Co-op Bank
A/c Name	"ASSO FOR ADVANCING RESCH IN OBESITY AIAAROCON 2018"
A/c No.	098100100001581
IFS Code	SRCB0000098
Bank Address	Opp. Gajanan Maharaj Temple Complex, Garkheda, Aurangabad- 431005

Food Choice:

Veg

Non Veg

Name(s) Of Accompanying Person(s) :

	Name	Age

Secretariat :

Dr. Priti Phatale (Organizing Secretary)

AIAAROCON 2018

Samrat Endocrine Institute Plot No 60, New Rokadiya Hanuman Colony , Behind Cosmos Bank , Near LMS shop , Aurangabad 431001

Contact : 8459438215 | Email : aiaarocon2018@gmail.com | Website : www.aiaarocon2018.com