

Date : 24-25-26 June 2022

Venue: Courtyard by Marriott, Madurai

## **REGISTRATION FORM**

		Receipt No.
PERSONAL DETAILS		(Please fill in CAPITAL LETTERS only
Full Name :		
Medical Council No.		Gender : Male Female
Phone :	Email:	
Institution/ Company:		
Address :		
Address :		Pin Code :
Category	Upto 31st May 2022	After 1st June 2022
Delegate	₹4000	<b>₹5000</b>
Spouse / Assoc Delegate / ESI Member	₹3000	<b>₹4000</b>
Post Graduate	₹2500	<b>₹3000</b>
	Spot Registration	
PAYMENT DETAILS		
UPI/Cash/DD/Cheque No:	Date:	Amount Rs.:
Bank & Branch Name :	ality f	
N.B.:  1.Post Graduate should furnish a proof of his/her status from the h 2. Payments may be made in Cash/DD/Cheque payable at Chennai 3. Spot Registration not available.		ety" Signature & Stamp
Conference Secretariat		
Organizing Chairperson	Organizing Secretar	Annual Property and the Annual State of the Control
<b>Dr V.Kumaravel</b> 9940582328	Dr R.M.Manikanda 9443021482	n
For Registrations		
Alpha Hospital & Research Centre Institute of Diabetes and Endocrinology		
28/20 Gatelock Road, Mela Anunannady, M	adurai	

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