

# CONFERENCE REGISTRATION & ABSTRACT FORM

(Please Write in Capital Letters)

Delegate (Dr.) Surname : \_\_\_\_\_

First Name : \_\_\_\_\_

Middle Name : \_\_\_\_\_

Name as it should appear on the Badge / Certificate : \_\_\_\_\_

Sex :           • Male            • Female

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

City : \_\_\_\_\_ State : \_\_\_\_\_ Pin : \_\_\_\_\_

Institute & Dept. \_\_\_\_\_ Designation : \_\_\_\_\_

MMC No.: \_\_\_\_\_ Tel. Clinic : \_\_\_\_\_ Res. : \_\_\_\_\_

Mob.: \_\_\_\_\_ E-mail : \_\_\_\_\_

## Registration Fees & Payment Details :

Sr.	Payment	Cut of Date
1.	Rs. 3,000/-	30/11/2018
2.	Rs. 4,000/-	31/11/2018
3.	Rs. 5,000/-	11/01/2019
4.	Rs. 6,000/-	Spot Registration
5.	Rs. 1,500/-	Student Registration

My Preferences : Conference  Accommodation  Abstract

(In Words) Rupee \_\_\_\_\_

Demand Draft \_\_\_\_\_ Dated \_\_\_\_\_ Bank \_\_\_\_\_

**All payments have to be sent by DD/at par Cheque in favor of "Vidarbha Association of Physicians, Yavatmal"**

**Online Transfers : SBI, Br. Yavatmal, AC No. 62271200055, IFSC : SBIN0000506**

Registration & Accommodation form should be sent to :-

Organizing Secretary VAPICON 2019

Dhawane Hospital, Mainde Chowk, Sankat Mochan Road, Yavatmal 445 001. Dist. Yavatmal

Ph. No.: 07232-248860, Mob. 9763421633, E-mail : vapicon2019@gmail.com

Aem Events : Plot No. 292, Shankar Nagar, Nagpur

Cell : 9822717917, 9822675744

E-mail : andulkar@yahoo.co.in website : www.aemevents.in

Spot Registration will not Guarantee Accommodation if required.

\* Certificate from HOD is mandatory for Students. cancellation will be considered by 15 th Dec. 2018.

All correspondence regarding Accommodation & Registration should be done through " Aem Events"

Org. Committee is not responsible for Registration & Accommodation. For Rates & packages of Accommodation at Yavatmal you can directly communicate with " Aem Events". Allocation of room partners will be at the discretion of the " Aem Events". No changes will be possible later. conference Registration is compulsory for submitting the Abstract paper. Kindly send Abstract up to maximum 300 words in open document and mail in an attached file to andulkar@yahoo.co.in . in Last for submitting the Abstract is on or before 15th Dec. 2018. All Abstract forms should be submitted along with your Registration number. The Abstract should be sent in A4 Paper type 1.5 space Times New Roman fonts-size 12 in rectangular box. Soft copy of Presentation will be accepted on pen Drive/CD for LCD Presentation only with power point XP. Email address is Mandatory. The Abstracts submitted will be the property of vapicon 2019.

The decision of the Scientific Committee and the judges will be final and binding. Best presentation will be awarded with prizes and Certificate of Appreciation.