

REGISTRATION FORM

Taj Coromandel, Chennai - Oct 1,2 2011

7th NATIONAL CONFERENCE

The Indian Society for Bone and Mineral Research

Personal Information:

Prof. Dr. Mr. Ms.

Membership No. _____

First Name: _____ Last Name: _____

Hospital Name: _____

Title / Position: _____

Address: _____

City: _____ Pin / Zip Code: _____

State: _____ Country: _____

Tel. (O): _____ (R): _____ Fax: _____

Mobile: _____ Email: _____

Name to be placed on the certificate: _____

Registration Fee: (please tick only one)

Faculty /Delegates

Upto 1st Sep, 2011

Spot Registration

Member

₹ 1,000

₹ 1,500

Non-Member

₹ 1,500

₹ 2,000

Postgraduate*

₹ 500

₹ 500

Please add ₹ 40/- for outstation cheques

*Please send / bring certificate from head of the department

Note: Limited guest room accommodation available on payment for postgraduate students on first come first serve basis

Cancellation and Reimbursements:

Cancellation and reimbursement of registration fee is possible against request as follows:

Cancellation Policy: 75% of the registration will be refunded if cancelled before 15th September 2011.
After 15th September no refunds will be given.

DD/Cheque in favour of "ISBMR Chennai 2011" payable at Chennai

Send the registration form to:

Organising Secretary

7/12, 15th Cross Street, Sastri Nagar, Adyar, Chennai - 600 020, Tamilnadu, South India.

Phone: +91-44-2446 0762 , +91-44-2446 0763 | Cell: +91-98406 08264 | Fax : +91-44-2446 0760, +91-44-2446 0761

E-Mail ID: isbmrchennai@gmail.com