



Association of Physicians of India Delhi State Chapter

XXIX ANNUAL CONFERENCE - 2018

Registration Form

To

Dr M P S Chawla

Organizing Secretary, XXIX Annual Conference - 2018

4/19 - B, Jangpura - B, New Delhi-110 014, India

Phone: 011-23361252 Mobile: +91-9868103623

Kindly register me for the **XXIX ANNUAL CONFERENCE - 2018** on December 22 & 23, 2018 at Hotel Ashok, Chanakyapuri, New Delhi, as per details below:

Name: _____

Address: _____

_____ Pin: _____

Tel: Clinic _____ Residence: _____

Mobile No. _____ E-mail: _____

API-DSC Member: Yes / No.

I am sending the Registration Fee of Rs. _____ by Cash / Cheque / Draft

No. _____ favouring **API Delhi State Chapter**, payable at New Delhi.

Date: _____ Signature _____

Registration Fee

| | API-DSC Members | Non Members | PG Students |
|--|--------------------|----------------|----------------|
| Upto 15.12.2018 (including Banquet) | Rs. 1000/- | Rs. 1500/- | Rs. 500/- |
| Upto 20.12.2018 (including Banquet) | Rs. 1500/- | Rs. 2000/- | Rs. 1000/- |

Spot Registration: Rs. 3000/-. Additional Dinner Card: Rs. 1500/-.
PG Students: Prior Registration is a must with HOD Recommendation