



IHSCON 2014

REGISTRATION FORM

Title (Dr./Prof.):

Name:

Address for Communication:

Accompanying Persons:

Address for Communication:

Institute / Hospital:

Telephone (Res). Area Code:

Number:

Mobile:

Telephone (Office): Area Code:

Number:

Fax:

REGISTRATION FEES

	Upto 31 st May	Upto 31 st July	Spot Reg.
IHS Member	₹ 1500/-	₹ 2000/-	₹ 2500/-
IHS Membership + Registration	₹ 2000/-	₹ 2500/-	₹ 3000/-
Non Member	₹ 2000/-	₹ 2500/-	₹ 3000/-
PG Students	₹ 1500/-	₹ 2000/-	₹ 2500/-

DVD & Booklet: Rs. 2500/-, IHS Membership No:

I enclose a Bank Draft / Cheque for Rs.

Cheque / DD No:

Dated:

Cheque/DD to be drawn in favour of IHSCON 2014, Payable at Cochin

Signature: