

Pune Head & Neck Cancer Meeting

7th, & 8th March 2015

Ruby Hall Clinic, 40 Sassoon Road, Pune

*Name _____

*Address _____

*City _____ State : _____ *Pin : _____

Tel. Clinic _____ Res : _____ *Mob : _____

*Email _____ *MMC Regd. No. _____

REGISTRATION FEES

	Upto 15th Jan	Upto 15th Feb	Spot
Consultants	3000/-	3500/-	4000/-
P G Students	2000/-	2500/-	3000/-
Overseas Delegates	200 \$	250 \$	300 \$

- Please add Rs 150/- for outstation cheques, or send an at par cheque.

- P. G. Students to attach a letter from HOD

- **CANCELLATION POLICY** : A written request should be sent on or before the **20th February 2015**.
50% of the delegate fee will be refunded two months after the conference.

PAYMENT DETAILS

(In Words) Rupee _____

D. D. / Cheque No : _____ Dated _____ Bank _____

All payments have to be sent by DD / at par Cheque in favour of "**GRANT MEDICAL FOUNDATION**"

**Registration form should be sent to
Medvents Conferences & Events Pvt Ltd**

Office No 112, Ashoka Pavillion, Dr Ambedkar Road, Above Mahesh Lunch Home, Camp - Pune - 411001. **Off.** : +91 20 26069376.

For Registrations Contact Supriya : +91 7767834459 **Email** : reachmedvents@hotmail.com