



Conference Secretariat:

Ahmedabad Obstetrics & Gynaecological Society (AOGS)

2nd Floor, Ahmedabad Medical Association, Building, Ashram Road, Ahmedabad - 380008 Ph.: 079 26586426 Web.: www.ahmedabadobgyn.org



REGISTRATION FORM

REGISTRATION DETAILS				
Category		Fees till 31st August	Fees till 31st October	SPOT Registration
Delegate (Conference + Workshop)		INR 7,080	INR 8,260	NR 9,440
PG Student (Conferer	ce + Workshop)	INR 4,720	INR 5,900	NR 7,080
DELEGATE DETAILS			Regi:	stration Fees includes 18% GS
Title: Prof. Dr. M Name:	r. Ms. M	rs.	Gender: 1	Male Female
Institute / Hospital Name:				
Postal Address:				
City:	State:	Country:	PIN:	
Phone (STD/ISD) Code:	(O):		(R):	
E-mail:	: Mobile:			
Fetal Neurosonology Update Fetal Cardio Update Gynec & Infertility				
REGISTRATION GUIDELINES			REG. CANCELLATION AND REFUND POLICY	
 Registration is mandatory for Workshop, Conference Registration fees will be based on the date of receipt of payment Photocopy of ID Proof (Driving License/Passport/Election Card/Aadhar Card) of the delegates is a must; please send it along with registration form Provide all the necessary details as required in the form & Provide us your updated email id; it will be used for the registration receipt & for the conference communication only Please preserve photocopy of all submissions for your record Registration fees include admission to the scientific hall, trade Exhibition, Inaugural Function, Lunches 				ade after 30th Sep 2017
Organizing Committee shall not be liable in a reasons Conference Organizers are not responsible for communication Please produce the confirmation letter at the	ny form in case of changes in dat r postal delays / failure of delive	/ venue due to unforeseen / by post or failure of electronic	' ICU payable at at Conference S (Please Mention you	Cheque In favour of 2017 ' Ahmedabad ecretariat Address r name, city and mobile the cheque or DD)
PAYMENT DETAILS				
Payment Type: By Cheque	/ DD: By	Cash: A	mount:	
Amount in Word:				
Cheque / DD No.:	Cheque / DD Date:			
Bank Name:	Branch:			