

REGISTRATION FORM



FIFTH CONFERENCE ON IRON DEFICIENCY

Delegate information: Local/Out Station; Male/Female; Age:

Please, provide following information as you would like it to appear on delegate badge.

Name :

Designation :

Institution :

City :

Postal Address along with PIN Code.

Mobile No.

e-mail address :

Associate Delegate Information : Local/Out Station; Male/Female; Age:

Relation with Delegate:

Name(As you would like it to appear on badge) :

Travel Information:

Arrival: Date & Time -

Train Name/No.:

Flight No./Airline:

Departure: Date & Time -

Train Name/No.:

Flight No./ Airline

Registration Fees:

Category of Delegate	Upto 31/8/09	After 31/8/09	Spot Registration
Delegate Local (Hyderabad)	500/-	1000/-	2000/-
Associate Delegate Local	500/-	1000/-	2000/-
Delegates Outstation	1000/-	2000/-	3000/-
Associate Delegates Outstation	2000/-	3000/-	3500/-

Payment by Bank Draft payable at Mumbai or by cheque payable at par in favour of 'Ficonid'

Correspondence:-

Out Station Delegates:

Dr. B C Mehta, 504, Prachi Society,

Juhu-Versova Link Rd, Andheri (W) Mumbai 400 053

E mail: iconid@gmail.com

Local Delegates:

N Kavitha, HOD, Apollo Gleneagle PET-CT Center,

Jubilee Hills, Hyderabad, 500 034.

E mail: dr_kavithareddy@rediffmail.com