

MEDICINE 2018

The 3rd American College of Physicians India Chapter Congress
 Theme: Practicing Wellness to Prevent Illness

31st August – 2nd, September 2018 | Ramada Plaza Hotel & Convention Centre, Lucknow

REGISTRATION FORM

DELEGATE DETAILS

Title: Prof. Dr. Mr. Ms. Mrs. Gender: Male Female Age: _____

First Name: _____ Middle Name: _____ Last Name: _____

Institute/ Hospital: _____ Designation: _____

Postal Address: _____

City: _____ State: _____ Pin: _____ Country: _____

ACP Membership No.: _____ Meal Preference: Veg. Non Veg.

MCI No.: _____ Phone (Off/Res.): _____

Mobile (Mandatory): _____ E-mail (Mandatory): _____

ACCOMPANYING PERSON DETAILS

Title: Prof. Dr. Mr. Ms. Mrs. Age Male Female Veg. Non Veg.

1. Name: _____

2. Name: _____

REGISTRATION FEE DETAIL

S. No.	CATEGORY	On Spot
01	MEMBERS	₹ 13000
02	NON MEMBERS	₹ 15000
03	ACCOMPANYING PERSON	₹ 8000
04	PG STUDENT	₹ 10000
05	UG STUDENT	₹ 1000 (without Gala Dinner) (Until 15 th Aug. 2018)
06	FOREIGN DELEGATE	USD 231 (₹ 16170)

Select Workshop: NONE INSULIN DIGITAL MEDICINE PULMONOLOGY ECG

I am enclosing here with a Cheque/ demand draft no. _____ dated ____/ ____/ _____
for _____ (in words: _____) only
drawn on _____ in favor of "ACP INDIA CHAPTER 2018" payable at
Lucknow.

Signature

ACCOUNT DETAILS :

Account Name : ACP INDIA CHAPTER 2018	A/C No : 1678050001809
Name of Bank : United Bank of India	IFSC CODE : UTBI0VNG584
MICR Code : 226027012	Branch : Vikas Nagar (1678), Lucknow
PAN No. : AAFAA9980R	

REGISTRATION GUIDELINES

- Spot registrants will not be guaranteed conference kit and gift.
- Please provide your membership number (RSSDI Membership No. & MCI No.) for our reference
- Online/ Card charges will be applicable at 3% of the total amount.
- Above mention registration fee inclusive of GST.
- Registration fees include kit, admission to the scientific hall, trade exhibition, inaugural function, lunches & dinner.
- Provide us your updated email id & mobile no. It will be used for the registration receipt and other conference communication.
- Organising Committee shall not be liable in any form in case of changes in date / venue due to unforeseen reasons.
- International card will not be accepted for online transaction. Delegate paying through International card can make the payment through www.concepttc.com/form/ via HDFC payment gateway.
- Conference Organisers are not responsible for postal delays / failure of delivery by post or failure of electronic communication.
- It is mandatory for all Delegates to carry their photo id (Government approved) for smooth registration procedure.
- Tariff for PG Students does not included Gala Dinner. Kindly register as delegate to Join in Gala Dinner.

CANCELLATION GUIDELINES

- Refund of Registration will be made only against the written request by email or post submitted before 15th August 2018 to the conference secretariat.
- From 16th August 2018 onwards, no refund request will be entertained.
- 25% of the Registration would be deducted as processing charges and rest will be refunded one month after conference completion.

Please mail the dully filled Registration form along with payment to:

ACP INDIA CHAPTER 2018 Secretariat Office

Shri Hari Kamal Diabetes Clinic & Research Centre

Jeewan Sahara Tower, Vikas Nagar, Kursi Road, Lucknow 226022

Phone : 0522-4024878, 7408555569

Email : acplucknow2018@gmail.com

Web: www.acpindiachapter2018.com

For Registration Query: Mr. Shekhar Srivastava +91 9821259003

For office use only

Receipt No.: _____

Registration No.: _____