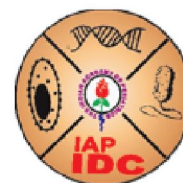
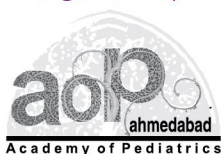




Organized By:



REGISTRATION FORM

NAME :
(AS REQUIRED TO BE PRINTED ON THE CERTIFICATE)

IAP MEMBERSHIP NO :

ADDRESS FOR CORRESPONDENCE:

City : Pin code : State : Country :

MOBILE (COMPULSORY) : E-MAIL (COMPULSORY):

(All future communications will be through e-mail via sms)

REGISTRATION DETAILS

Registration Category	Early Bird Till 7 th Jan 2018	Till 31 st March 2018	Till 30 st June 2018	Till 30 st Sept 2018	Spot Registration (After 1 st October)
IAP Member	4000	6000	7000	8500	10500
Non IAP Member	5000	7500	9000	10500	12000
PG Student	3500	4000	4500	5000	7000
Accompanying Persons	5000	7500	9000	10500	12000
Corporates	6000	8500	10000	12000	13500
Senior IAP Members (> 70 Years)	Free	Free	Free	Free	Rs 8500/-

*All Amounts are Inclusive of GST

Account Number: 231001001322

Account Name: Academy of Pediatrics Ahmedabad NCPID2018

IFSC Code: ICIC0002310

Branch Name: ICICI Bank Ltd, Ghodasar Branch, Ahmedabad.

Conference Secretariat:

Dr. Chetan Trivedi

Neha Children Hospital & Neonatal Center,
2nd Floor, Urmikunj Complex, Gordhanvadi Cross Road, Kankaria, Ahmedabad 380022 | Mobile: 9825061011
Email: ncpid2018@gmail.com | Website: www.ncpid2018.com

HELPLINE: +91 8260060082

Register Online at www.ncpid2018.com