

Registration Form

Current Concepts in Paediatric Orthopaedics & Trauma Symposium

7th & 8th April 2018

WelcomHotel Sheraton, Saket, New Delhi

Name:.....
(as required to be printed on the certificate)

Address for Correspondence:

.....

.....Pincode:.....

Mobile (COMPULSORY):..... E-mail (COMPULSORY):.....
All future communication will be through email & mobile via sms.

Category: (Tick one box)

Delegate / POF Member / PG Resident / SAARC/Overseas Delegate

Registration Fees		
Category	Early Bird (upto 28 th Feb 2018)	Late & Spot Registration (after 1 st March 2018)
Delegate	Rs 6000	Rs 7000
POF members	Rs 4500	Rs 5500
PG residents	Rs 4500	Rs 5500
SAARC / Overseas Delegate	USD 150	USD 200

Payment Details for

Please fill details of mode of payment

(a) Neft

(b) Cheque / Demand Draft

(c) Cash

Name of Account - POF CME

Bank - ORIENTAL BANK OF COMMERCE

Branch - APOLLO HOSPITAL, SARITA VIHAR, NEW DELHI 110044

Account Number - 50762413000858, IFSC - ORBC0105076

Online Payment

Online Registration : <http://pofdelhi.com/ccpotregistration.aspx>

For more details, please contact:

Manoj Padman

Organising Secretary

Department of Paediatric Orthopaedics

Max Smart Super Speciality Hospital,

Saket, New Delhi - 110017

Email: ccpotindia@gmail.com

Phone: 7042949696, 8860747388

Event Manager

Jitin Batra

Dreamz Conference Management Pvt. Ltd.

218, Ansal Majestic Tower

Vikas Puri, New Delhi - 110018

Mobile: +91 9810558569

Email: info@dreamztravel.net

Please Contact for all Registration & Accommodation Queries