

Arthroplasty Symposium- 2019

22nd December 2019

REGISTRATION FORM

Name (in capital letters) _____

Institution _____

Address _____

City _____ Pin _____ State _____

Phone _____ E-mail _____

Accommodation - required / not required _____

Category	Registration	On Spot Registration	Accommodation
Payment detail	₹ 1000/-	₹ 1500/-	₹ 2000/-

Mode for Payment

- Cheque/DD Draft of Rs. _____ in words _____
Bearing No. _____ Date _____ drawn on Bank _____
in favour of "Shri Ram Murti Smarak Institute of Medical Sciences" payable at Bareilly
- Online payment /NEFT - Account no. 52241010000010 and
IFS code - ORBC0105224 Bank - Oriental Bank of Commerce,
Branch - SRMSIMS, Bhojipura, Bareilly
- Online registration can also be done on the website: www.srms.ac.in/ ims
- In case of cash, please mention cash receipt no. _____ Date _____
- Accommodations are available at SRMS Alakhnanda Resort.

Please mail this form and bank draft / Cheque to :

Dr. Apser Khan

Organizing Secretary

Shri Ram Murti Smarak Institute of Medical Sciences

13 km., Bareilly-Nainital Road, Bareilly - 243202 (U.P.) India

Email: afserkhan@gmail.com

Mob.: 9458702221

*Signature
of the Delegate*