



REGISTRATION FORM

Sleep Update 2018

April 22nd, 2018

Venue: IIT Delhi (Lecture Hall Complex, Room No-310). Shaheed Jeet Singh Marg, Hauz Khas, New Delhi, 110016

Name (In Block Letters) Dr./Mr/Mrs/Ms _____
Organization _____
Specialty _____
Mailing Address _____
City _____ Pin _____ State _____ Country _____
Telephone (O) _____ (R) _____ *Mobile _____
Fax _____ *E-mail _____

Registration Fee

(Tick the amount which is applicable & enclose)

Table with 4 columns: Category, Early Bird (Till 15th March 2018), Late Bird (After 30th March 2018), 1st April 2018/On-Spot Registration. Rows include Indian Delegates and Foreign Delegate with fee amounts and checkboxes.

Payment Options:

1. Cheque/ Demand Draft:

Please find enclosed here with DD/Cheque no. _____ Dated _____

Drawn on (Bank's Name) _____

in favour of "ACE SCHOOL OF SLEEP& MEDICINE", Payable at New Delhi.

2. Wire Transfer:

Company Name: ACE SCHOOL OF SLEEP & MEDICINE

A/C NO. - 1747928

Bank - RATNAKAR BANK

Branch - HAUZ KHAS, NEW DELHI - 110016

IFSC CODE - RATN0000141,

SWIFT CODE - RATNINBB

DD you can Email or post to - Dr. Manvir Bhatia, L-23, Hauz Khas Enclave,

New Delhi-

110016, Ph.01146070321

Conference Secretariat:

Neurology and Sleep Centre, L-23,

Hauz Khas Enclave, New Delhi - 110016

Tel.: 01146070321 Email: info.assm@gmail.com