

PULMOCON-2024

Affix your
passport
size photo

REGISTRATION FORM

22nd All India Update in Pulmonary Medicine | 21st and 22nd of September 2024

Name :

PGT Non PGT

Institute:

Age: Sex: Phone No.:

Address for correspondence:

.....

E-mail :

I hereby enclose Cheque / Cash/ NEFT/ RTGS/ Demand Draft / Payment details

.....

No. of on in favour of “ **Institute of Pulmocare & Research** ”.

I want to join workshop Yes No

Workshop : ILD skill workshop

.....
Signature

(Photocopy of this form will also be accepted)

Bank A/c details : Name of Account “ **Institute of Pulmocare & Research** ”

Bank Name : **SBI, CF Block, Salt Lake, Kolkata- 700064**

A/c No.: **31344713421** | IFC Code: **SBIN0012360** | PAN Card No.: **AAAA10592E**

Registration till 17th Aug. 2024	Registration till 11th Sept. 2024	Spot Registration	Workshop
Delegate : ₹ 2000	Delegate : ₹ 3000	Delegate : ₹4000	Delegate : ₹ 1000
PGT : ₹ 1500	PGT : ₹ 2000	PGT : ₹2500	PGT : ₹ 1000

Secretarial Address : Institute of Pulmocare & Research

DG-8, Beside Sister Nivedita University, Action Area-I, New Town, Kolkata - 700 156 (On the way to Newtown DPS School)

Ph. : 80179 90424, 8274081205 | E-mail : ipcr_india@yahoo.com | Website : www.pulmocareindia.org

For online registration please visit : www.pulmocareindia.org