

3rd Annual Conference of Endocrine Society of Tamil Nadu and Puducherry

Date : Date : 11th & 12th, July 2015

Venue: Hotel Kodai International, Kodaikanal.

REGISTRATION FORM

Registration No.		Receipt No	o	
PERSONAL DETAILS		(Please fill i	n CAPITAL LETTERS only)	
Title Dr Prof Mr] Mrs Ms)		
Full Name :		Gender:	Male Female	
Address :				
	City:	Pin Co	de:	
Institution/ Company:				
Phone:Mobile:	Email:		Fax No :	
Category	Upto 31st May 2015	After 1st June 2015	Spot Registration	
Delegate	₹4000	₹5000	₹8000	
Spouse / Assoc Delegate / ESI Member	₹3000	₹4000	₹6000	
International Delegate	\$150	\$ 200	\$ 400	
Post Graduate	₹ 2 500	₹3000	₹4000	
PAYMENT DETAILS				
DD/Cheque No:	Date:	Amount Rs): _		
Amount in words:				
Bank & Branch Name :				
N.B.: 1.Post Graduate should furnish a proof of his/her stat 2. Payments may be made in Cash/DD/Cheque payab	·	Endocrine Society"	Signature & Stamp	
Kindly send the duly filled form at the bel	low address :			
Conference secretariat				
Dr. V.Kumaravel				
Organizing secretary, Trendo 2015	L			
Alpha Hospital and Research Cent				
Institute of Diabetes and Endocri 2B/2C, Gate lock road, Mela Anup	· ·			
Madurai - 625 009, TN, India	ppariitauy			
Phone : +91 452-2312223, 24, 2	77			
Mohile : +91 99405 82328				

TRENDO 2015

Email : drvkumaravel@gmail.com

: www.trendo2015.com

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