



NCPE2019

AIIMS JODHPUR



7th National Conference on Pediatric Education

REGISTRATION FORM

Name (As it should appear on your badge and certificate)

Gender: Male Female MCI / State Registration No.:

Speciality Designation :

Organization

Address

City : Mobile (mandatory) :

Email(mandatory) :

Payment Details:-

Mode of payment: Cash /DD/ Cheque (Payable at Par) in favour of "National Conference on Pediatric Education 2019 (NCPE2019)"

For RTGS:

Account name **"National Conference on Pediatric Education 2019 (NCPE 2019)"**

Bank Name: **Bank of Baroda, Industrial Estate Br., Basni Industrial Area Jodhpur (Raj) 342005**

Account No.: **18720100024562**

IFSC Code: **BARBOINDJOD** (5TH character zero)

MICR Code: **342012004**

Filled form with payment transaction id must be sent either by email (scan copy) or post / courier Amount paid Rs. _____ (as per guidelines mention in brochure)

Mode of payment – Cash/DD/RTGS/Cheques (multistate only)

Email : ncpe2019aiimsjodhpur@gmail.com

Address for correspondence -

Dr. Siyaram Didel (Org. Secretary)

Room No 43, 2nd Floor,

Dept. of Pediatrics,

AIIMS, Jodhpur 342005

9876228345 /9592079797

ncpe2019aiimsjodhpur@gmail.com

Prof Kuldeep Singh (Org. Chairman)

Room No 43, 2nd Floor,

Dept. of Pediatrics,

AIIMS, Jodhpur 342005

8003996940

ncpe2019aiimsjodhpur@gmail.com

Email Id :
ncpe2019aiimsjodhpur@gmail.com

Website :
www.ncpe2019aiimsjodhpur.com

Organized by :
Department of Pediatrics
All India Institute of Medical Science Jodhpur