

IAN Postgraduate Summer Course in Neurology-2012



Organized by
Department of Neurology
National Institute of Mental Health & Neurosciences (NIMHANS),
Bangalore-560029



March 16-18, 2012, NIMHANS Convention Centre, Bangalore

REGISTRATION FORM

Name in full: _____

Details of Post-graduation (DM/DNB) (Year of Enrollment): _____

College/Institute: _____

Mailing address: _____

City: _____ State: _____ Country: _____ Pin: _____

Telephone: _____ Fax: _____ Mobile: _____

E-mail: _____ Website: _____

College/Institute Address (If different from above)

City: _____ State: _____ Country: _____ Pin: _____

Payment Details:

Demand Draft No.: _____, dated: _____, drawn on: _____,

for Rs. _____ (in words _____)

Date:

Signature of the Applicant

Application should be forwarded by the Head of the Department of the College/Institute

Signature and seal of the forwarding authority

Date:

Completed application form and payment should be sent to:

Dr. Pramod Kumar Pal,

Organizing Secretary, "IAN Postgraduate Summer Course in Neurology-2012"

Department of Neurology, National Institute of Mental Health & Neurosciences (NIMHANS), Bangalore-560029, Karnataka, India

REGISTRATION FEES

Regular	Late	Spot Registration
Up to 28 th February, 2012	After 28 th February 2012	(On Availability*)
₹ 1500	₹ 2000	₹ 3000

*Maximum number of delegates : 125

Registration form needs to be forwarded by the Head of the Department / Institution

Payments should be made through Bank Draft in favour of "IAN Postgraduate Summer Course in Neurology-2012", payable at Bangalore.