

## REGISTRATION FORM

### With Accommodation

Surname : ..... First Name : .....

Name of Institution : .....

Postal Address : .....

.....

.....

City : ..... Pin code : .....

State : ..... Country : .....

Date of Birth : .....

Email (Please mention active email ID) : .....

Tel. (with area code): Residence : .....

Office : .....

(MANDATORY) Mobile : ..... Fax : .....

Accompanying Person Name: 1. ....

2. ....

### Registration Details

Category	Till 31 <sup>st</sup> Oct., 2018		1 <sup>st</sup> Nov. to 10 <sup>th</sup> Nov., 2018	
	2 Nights	3 Nights	2 Nights	3 Nights
<b>5 Star Category</b>				
Delegate on Single Occupancy	<input type="checkbox"/> Rs. 32,000	<input type="checkbox"/> Rs. 43,500	<input type="checkbox"/> Rs. 33,000	<input type="checkbox"/> Rs. 44,500
Delegate on Twin Sharing	<input type="checkbox"/> Rs. 22,500	<input type="checkbox"/> Rs. 29,250	<input type="checkbox"/> Rs. 23,500	<input type="checkbox"/> Rs. 30,250
Delegate with One Accompanying Person	<input type="checkbox"/> Rs. 38,000	<input type="checkbox"/> Rs. 51,500	<input type="checkbox"/> Rs. 39,000	<input type="checkbox"/> Rs. 52,500
<b>4 Star Category</b>				
Delegate on Single Occupancy	<input type="checkbox"/> Rs. 26,700	<input type="checkbox"/> Rs. 35,550	<input type="checkbox"/> Rs. 27,700	<input type="checkbox"/> Rs. 36,550
Delegate on Twin Sharing	<input type="checkbox"/> Rs. 19,850	<input type="checkbox"/> Rs. 25,275	<input type="checkbox"/> Rs. 20,850	<input type="checkbox"/> Rs. 26,275
Delegate with One Accompanying Person	<input type="checkbox"/> Rs. 32,700	<input type="checkbox"/> Rs. 43,550	<input type="checkbox"/> Rs. 33,700	<input type="checkbox"/> Rs. 44,550
<b>3 Star Category</b>				
Delegate on Single Occupancy	<input type="checkbox"/> Rs. 18,500	<input type="checkbox"/> Rs. 23,250	<input type="checkbox"/> Rs. 19,500	<input type="checkbox"/> Rs. 24,250
Delegate on Twin Sharing	<input type="checkbox"/> Rs. 15,750	<input type="checkbox"/> Rs. 19,125	<input type="checkbox"/> Rs. 16,750	<input type="checkbox"/> Rs. 20,125
Delegate with One Accompanying Person	<input type="checkbox"/> Rs. 24,500	<input type="checkbox"/> Rs. 31,250	<input type="checkbox"/> Rs. 25,500	<input type="checkbox"/> Rs. 32,250

Note: The above rates are inclusive of GST applicable.

I like to share my room with Dr. ....

and Mobile Number .....

\* Certificate from HOD Mandatory



# 13<sup>th</sup> International Congress of Association of Minimal Access Surgeons of India

Date: 15<sup>th</sup>- 17<sup>th</sup> November 2018 | Venue: SGPGI, Lucknow



## Skill Development Course

✓	COURSE	FEE
<input type="checkbox"/>	Simulator Basic	Rs. 500/-
<input type="checkbox"/>	Simulator Advance	Rs. 1,000/-
<input type="checkbox"/>	Endoscopy Simulator	Rs. 500/-
<input type="checkbox"/>	Robotic Training	Rs. 2,000/-

### For Registration

- Registration is mandatory
- Registered delegates gets preference.
- Registration can be done separately or along with conference registration.

## Payment Mode - Wire Transfer

Account Name : AMASICON 2018  
Bank : STATE BANK OF INDIA  
Account Number : 37240152547  
Branch : SGPGI, LUCKNOW  
IFSC Code : SBIN0007789  
MICR Code : 226002034  
Branch Code : 07789  
PAN Card No. : AAAAAA6705D

### Demand Draft :

Draft to be drawn in favour of "AMASICON 2018"  
Payable at LUCKNOW.

### Conference Secretariat : AMASICON 2018

Dept Surgical Gastroentrology, SGPGIMS, Lucknow-226014  
Mob.: +91 8004904752 E-mail: amasicon2018@gmail.com

**Cancellation & Refund Policy:** All cancellations should be in writing and sent Secretariate. Cancellations received upto 31.08.2018 will be entitled for only 30% refund of the amount paid. No refund for cancellation made after 31.08.2018. The refund process will begin only 30 days after the completion of the conference.

For Online Registration & Details : [www.amasicon2018.com](http://www.amasicon2018.com)

Date : .....

Signature : .....