

## REGISTRATION FORM

**Name** :

**Age** :

**Sex** :

**Designation** :

**Affiliation** :

**ACM member** :  Yes  No

If yes, provide membership number: \_\_\_\_\_

**Paper presentation** :  Yes  No

**Food** :  Veg  Non-Veg

**Registration transaction details** :

NEFT  Demand draft  Cheque

Provide NEFT/DD/cheque details (UTR no/Cheque-DD no: and date):

Signature of Delegate

Signature of HOD  
(In case of resident)

Date:

Date: