

REGISTRATION FORM

International Postgraduate Medical Training

21st – 28th of January 2009.

ECC, Whitefield, Bangalore, India – 560066.

Personal Details:

First Name: _____ Last Name: _____

Age: _____

Male _____

Female _____

Complete Address: _____

Phone: _____ E - mail _____

Fax: _____ Mobile: _____

Professional Details:

Profession: _____

Educational Qualification: _____

Specialization: _____

Professional Experience: _____

Place of Work: _____

Phone: _____ E - mail: _____

Note: Please tick the contact address for communication.

Home

Organization

Registration Category

Indian Participants:

Doctors

Teachers

Others (Please mention your area of work)

Select Category and Registration Tariff

Registration Categories	Indian Participants Foreign Participants	Foreign Participants
<input type="checkbox"/> Teachers	Rs. 7000/-	200 Euros
<input type="checkbox"/> Therapists	Rs. 10,000/-	300 Euros
<input type="checkbox"/> Doctors & Others	Rs. 10,000/-	300 Euros

Note: Early bird discount of Rs. 1000/- for Teachers and Therapists & Doctors (only for first time participants) if they register on or before 30th November, 2008.

IPMT

- ❖ IPMT Registration includes the Training Sessions, 3 meals and 2 teas / day and Accommodation for 7 days & 7 nights.
- ❖ All IPMT participants will have to arrange their own transports to & from railway station/airport to the venue. Ecumenical Christian Centre, Post Bag # 11, Whitefield, Bangalore - 560 066. Karnataka, India.

Payment Mode

- ❖ Payment should be made in the form of a Cheque / Banker's Cheque favouring Anthroposophic Medical Society, Payable at Bangalore, India, and should be posted to Dr. Delna Tarapore, C/o Anthroposophical Medical Society(Bangalore branch) 429, Varthur road, Nagavarapalya, Bangalore, Karnataka, India - 560 066
- ❖ Registration fee can also be sent by a Swift Wire Transfer of Funds (Euros or equivalent US \$)

Foreign Participants:

Doctors

Teachers

Others (Please mention your area of work) _