

EM Genesis – First Time in India

NATIONAL LEVEL EMERGENCY MEDICINE CONFERENCE – 18th & 19th December, 2017

Department of Emergency Medicine
MOSC Medical College Hospital, Kolenchery, Ernakulam, Kerala

REGISTRATION FORM

Single Registration

Group Registration (≥5)

Name: _____ Age: _____ Sex: _____

Designation: _____

Doctor: Medical Council registration no: _____ Registration Council: _____

Nurses: RN, RM no: _____ Registration council: _____

Institution address: _____

Mobile: _____ Email id: _____

Payment – Kindly tick the appropriate option

	Single registration	Tick	Group registration (≥5)	Tick
UG Student/Intern	Rs. 1000/-		Rs. 600/- per person	
Graduate/ PG student	Rs. 1500/-		Rs. 1200/- per person	
Consultant	Rs. 2000/-		Rs. 1500/- per person	

Payment details:

Mode of payment	Transaction number	Date
NEFT/RTGS <i>Name of the bank:</i> Federal Bank Ltd, Kolenchery P.O. Pin 682311 <i>Account Name:</i> MOSC Medical Mission Hospital <i>Account no:</i> 10115500000918 <i>IFSC:</i> FDRL0001011, Current Account		
Paytm 8078411355 , EM MOSC MCH, Kolenchery		
DD <i>In favour of</i> “MOSC Medical Mission Hospital” <i>Payable at</i> Kolenchery		

Presentation if any:

Oral presentation Poster presentation Case presentation

If so, topic of presentation: _____

Signature of the delegate

Contact address

Conference Secretariat, EM Genesis, Department of Emergency Medicine,
MOSC Medical College Hospital, Kolenchery P.O. - 682311, Ernakulam, Kerala.

Mob: 09496339347, 09447701890

Email: emed@moscmm.org

Kindly mail your registration form. | If group registration, kindly mail the registration form together