



PESICON

13TH PEDIATRIC 2018 ENDOSURGEONS CONFERENCE

FEBRUARY 23-25, 2018 | INDRAPRASTHA,
APOLLO HOSPITAL, NEW DELHI, INDIA

Block your Dates!

Thrust Areas :

- Pediatric Endourology
- Robotic Pediatric Urology
- Adolescent Bariatric Surgery
- Hands on Laparoscopic Training

Dr. Sujit Chowdhary
Organizing Chairperson

Dr. Deepak Kandpal
Organizing Secretary

Conference Secretariat :

Room No.1244, Dept. of Pediatric Urology and Pediatric Surgery
Indraprastha Apollo Hospital, Sarita Vihar, New Delhi - 110044

Mob: +91-9871799536, **Email:** pesicon2018@gmail.com, **Website:** www.pesicon2018.com



ALPCORD NETWORK
Event & Conference Management Company Pvt. Ltd.

PESICON 2018



13TH PEDIATRIC ENDOSURGEONS CONFERENCE

February 23-25, 2018 | Indraprastha Apollo Hospital, New Delhi, India

REGISTRATION FORM

Name Gender : M F

(PLEASE FILL IN CAPITAL LETTERS AS TO APPEAR IN THE CERTIFICATE)

Designation : Department :

Hospital / Institution :

Mailing Address :

City..... Pin Code : State : Country :

*E-mail:.....

* Mobile: * Tel No Res / Off.....

Registration Category : PESI MEMBER PG (PESI) PRE-CONFERENCE SKILLS COURSE FOR MEMBERS
 NON PESI PG (NON PESI) WORKSHOP
 OVERSEAS DELEGATES ACCOMPANYING PERSON/SPOUSE

| Registration details | Amount | Payment Details |
|--|---------|-------------------------------------|
| Registration | : _____ | Cheque / DD No. : _____ Date: _____ |
| Residential (including registration and accommodation for 2 nights at the venue) | : _____ | Drawn on Bank : _____ |
| Pre-Conference Skills Course For Members | : _____ | Branch : _____ |
| Single Accommodation | : _____ | Amount in words : _____ |
| Workshop | : _____ | |
| Total | : _____ | Date: _____ Signature: _____ |

Mode of Payment :

- At Par Cheque/DD to be drawn in favour of "PESICON 2018" payable at **New Delhi**.

Account Details :

| | |
|----------------|---|
| Account Name | PESICON 2018 |
| Bank Name | Oriental Bank of Commerce |
| Branch Address | 323 Gali No. 16 Indraprasth Near Veer Bazar Road Part, New Delhi 110084 |
| A/C. No. | 50762413000658 |
| IFSC Code | ORBC0105076 |
| MICR Code | 110022158 |

Please send the duly filled registration form and DD/Cheque (NEFT/Cash deposit receipt) at the

Conference Secretariat -

Room No.1244, Dept. of Pediatric Urology and Pediatric Surgery
 Indraprastha Apollo Hospital, Sarita Vihar, New Delhi - 110044
 Mob: +91-9654114025
 Email: pesicon2018@gmail.com
 Website: www.pesicon2018.com

For Office use only : Receipt :

Date :

Reg No :

| Category | Early Bird Registration Fee (Till 30th Dec 2017) | Early Registration Fee (1st Jan 2018 - 31st Jan 2018) | Late Registration Fee (After 31st Jan 2018) | Residential (including registration and accommodation for 2 nights at the Eros Hotel, Nehru Place) | Residential (Including Registration and Shared Accommodation for 2 nights at the Eros Hotel, Nehru Place) These rates are valid upto 31st Jan 2018 |
|---|--|---|---|--|---|
| PESI Member | INR 6500 | INR 8000 | INR 10500 | INR 16000 | INR 17000 |
| Non PESI | INR 8500 | INR 10000 | INR 12500 | INR 18000 | INR 19000 |
| Overseas Delegates | USD 175 | USD 275 | USD 275 | USD 310 | USD 310 |
| PG (PESI) | INR 6000 | INR 7500 | INR 10000 | INR 15000 | INR 16000 |
| PG (Non PESI) | INR 7000 | INR 8500 | INR 11000 | INR 16000 | INR 17000 |
| Accompanying Person/Spouse | INR 6000 | INR 7500 | INR 10000 | INR 15000 | INR 16000 |
| Basic Course / Dry Lab Workshop* | INR 3500 | INR 7000 | INR 8500 | — | — |
| Advanced Course /Animal Lab Workshop* | INR 7000 | INR 14000 | INR 15500 | — | — |
| Single Room + Registration (These rates are valid upto 31st Dec 2017)** | | | | INR 22500 | — |
| Single Room + Registration (These rates are valid upto 31st Jan 2018)** | | | | INR 24000 | — |

Note: • *30 registrants for each workshop on first come basis. • ** No spot registration will be entertained.