

# 18th International Conference of Indian Association of Palliative Care (IAPC)

February 11th to 13th, 2011 (Friday - Sunday), Lucknow  
Theme: "Networking in Palliative Care"  
Email: [iapcon2011@canceraidssocietyindia.org](mailto:iapcon2011@canceraidssocietyindia.org)  
Phones: 91-522-2259157, 4043686, 3255278 Fax: 91-522-2259239

## Registration Form

Ref. Receipt No.:.....

Kindly send filled forms to:  
Mr. Piyush Gupta  
Organizing Secretary IAPCON 2011 &  
Principal Executive Officer, Cancer Aid Society  
2-A, First Floor, Regency Avadh Complex,  
Chowk, Lucknow UP, (India) 226003

Kindly fill up the form in capital letters & tick appropriate box.

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Designation \_\_\_\_\_ Organization \_\_\_\_\_

Address for \_\_\_\_\_

Correspondence \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Pin / Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile \_\_\_\_\_ E mail \_\_\_\_\_

Name of Accompanying Person \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

In case of emergency contact details \_\_\_\_\_

FOOD PREFERENCE Veg. Non Veg. Jain.

### REGISTRATION FEE:

Category	Upto 31st May 2010	Upto 31st Oct 2010	On Spot
Member IAPC	INR 2000	INR 3000	INR 4000
Non Members	INR 3000	INR 4500	INR 6000
Post Graduates	INR 1500	INR 2250	INR 3000
Nurses / Volunteers	INR 1000	INR 1500	INR 2000
Overseas Delegates	USD 250	USD 350	USD 500
Accompanying Person Spouse & children above 5 years	INR 1500	INR 2000	INR 2500

PG Students must produce Certificate from the respective institution.

For all your queries regarding Registration / Accommodation please quote unique receipt number

**ACCOMMODATION:** Hotel reservation without payment of one night deposit will not be processed.

Accommodation Category: \_\_\_\_\_ Arrival date (dd/mm/yy) \_\_\_\_\_ Checkout Date (dd/mm/yy) \_\_\_\_\_

Number of nights \_\_\_\_\_ x Cost per night \_\_\_\_\_ Total Cost of Accommodation \_\_\_\_\_

### PAID TRANSPORT REQUEST

Arrival Train/ Flight No \_\_\_\_\_ Date (dd/mm/yy) \_\_\_\_\_ Time \_\_\_\_\_

Departure Train/ Flight No \_\_\_\_\_ Date (dd/mm/yy) \_\_\_\_\_ Time \_\_\_\_\_

**TOTAL AMOUNT** (A+ B) = \_\_\_\_\_ (A) Registration \_\_\_\_\_ (B) Accommodation Amount \_\_\_\_\_

**Bank Details:** State Bank of India Branch: Chowk, Lucknow Account No. 31037519682 IFSC Code: SBIN0001100

Mode of payment Cash / D.D. No. / Deposit ..... dated ..... Bank.....

Branch ..... for Rupees .....

in favor of "IAPCON2011" Payable at Lucknow.

Date: (dd/mm/yy) .....

Signature: .....