



13TH ANNUAL CONFERENCE OF MAHARASHTRA ASSOCIATION OF PHYSICIANS (MAP)



ORGANISED BY: API VIDARBHA CHAPTER



2nd - 5th November 2023

Registration form



Hotel Centre Point, Nagpur

(Please write in block letter)

Date:

Receipt No: (for office use only)

*Title: Dr. Prof. Mr. Mrs. Ms. (Please tick as appropriate)

*First Name:..... Last Name:.....

*State Medical Council Registration No.:.....

*Address:.....

*City:..... State:..... Pin Code:.....

Country:..... Phone: (with Std Code)..... Mobile (Mandatory).....

*Email (Mandatory):.....

Accompanying Person Details: (Please tick as appropriate)

Full Name:..... Age:.....

Full Name:..... Age:.....



pay and send
screenshot with
registration form to
mapcon2023@gmail.com

Category

Upto 31 July

Upto 31 Sept

1 Oct - Spot

Category	Upto 31 July	Upto 31 Sept	1 Oct - Spot
Registration Fees	INR 10000 + 1800 GST = 11800	INR 12500 + 2250 GST = 14750	INR 15000 + 2700 GST = 17700
PG Students	INR 6000 + 1080 GST = 7080	INR 7000 + 1260 GST = 8260	INR 7000 + 1260 GST = 8260
Accompanying	INR 10000 + 1800 GST = 11800	INR 12500 + 2250 GST = 14750	INR 15000 + 2700 GST = 17700

*PG Students should submit the bona fide certificate from Head of the Department/Institution along with Registration form.

Amount Paid for - Conference Rs. Accompanying Person: Rs.....

Total Paid Rs..... Amount in word:.....

Mode of Payment: Cash Card DD Paytm/PhonePay/Gpay

DD/ Paytm/PhonePay/Gpay/ NEFT Transaction No:..... Date.....

DD/ should be in favor of "MAPCON 2023" payable at Nagpur

Bank details :

A/c Name: **MAPCON 2023** A/c No: **7406183914**
Bank Name: **Indian Bank. Branch: Bajaj Nagar, Nagpur** IFSC: **IDIB000B559**
MICR: **440019007**

Signature

Correspondence Address:

Dr Nikhil Balankhe - Organising Secretary
GT Memorial Hospital, Pande Layout, Khamla Road, Nagpur 440015
Mob: 9146022747, Email: mapcon2023@gmail.com, Web: www.mapcon2023nagpur.com

Official Conference Manager

