

## Registration Form for 3-C Con 2010

Cheque or DD's to be made A/C payee and in the name of "Care Cardiovascular Consultants Pvt. Ltd." Kindly mail the registration form along with the cheque/DD to our office. All Cash Payment at 'The Heart Care Clinic,

### Registration Fees (Please make a choice as per modules below)

	Modules	Before 15-12-09	Spot Reg. (After 16-12-09)
(A)	Main Conference Module (January 8-9, 2010)	<input type="checkbox"/> 5000	<input type="checkbox"/> 6000
(B)	*Certification Courses (January 10, 2010)		
	<ul style="list-style-type: none"> <li>■ Clinical Cardiology</li> <li>■ Critical Care Medicine</li> <li>■ General Medicine</li> <li>■ "CP-QA" Consumer Protection Quality Assurance</li> </ul>	<input type="checkbox"/> 1500 <input type="checkbox"/> 1500 <input type="checkbox"/> 1500 <input type="checkbox"/> 1500	<input type="checkbox"/> 2000 <input type="checkbox"/> 2000 <input type="checkbox"/> 2000 <input type="checkbox"/> 2000
(C)	Total (A + B)	<input type="checkbox"/>	<input type="checkbox"/>
(D)	** Deposit for Hotel Accommodation	<input type="checkbox"/> 3000	
(E)	For students doing MD (Medicine) with proof	<input type="checkbox"/> 2000	<input type="checkbox"/> 3000
(F)	Foreign Delegates	<input type="checkbox"/> US \$ 300	<input type="checkbox"/> US \$ 500
(G)	% Deduction (in case of cancellation)	50 %	No Refund

Prof.     Dr     Mr.     Mrs.     Ms.

First Name : \_\_\_\_\_ Middle Name : \_\_\_\_\_ Last Name : \_\_\_\_\_

Qualification : \_\_\_\_\_

Resi. Address : \_\_\_\_\_

City : \_\_\_\_\_ State : \_\_\_\_\_ Pin Code : \_\_\_\_\_

Telephone (STD Code) (O) \_\_\_\_\_ (R) \_\_\_\_\_ Mobile : \_\_\_\_\_

Fax : \_\_\_\_\_ Email : \_\_\_\_\_

#### Payment Details :

Rs. \_\_\_\_\_ Rupees in word : \_\_\_\_\_

Draft/Cheque No. \_\_\_\_\_ Bank \_\_\_\_\_ Dated \_\_\_\_\_

If you want hotel accommodation?      Yes      No     (If yes, Rs. 3,000/-)

(The accommodation package is priced at Rs. 3,000/-)

\_\_\_\_\_  
Signature

\* Choose any one certification course, \*\* Hotel Accommodation is optional. If you have applied for accommodation, please send a separate deposit cheque of Rs. 3000 to cover the cost of your stay for two nights. Due to limited seating in various venues, register early to avoid disappointment.

For any Hotel Booking and Accommodation query kindly contact through email : [3ccon.ccc@gmail.com](mailto:3ccon.ccc@gmail.com)

#### Conference Secretariat : 3-C Con 2010

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