

**REGISTRATION FORM
(PLEASE FILL IN CAPITAL LETTERS)**

DELEGATE DETAILS

First Name: Middle Name: Last Name:

Name to appear on Badge & Certificate.....

IHRSCON Membership Number, if Applicable: Sex: Male Female

Address

City:State:PinCode:

Mobile: Email:

Organisation / Institute:

Meal Preference: Vegetarian Non-Vegetarian

ACCOMPANYING PERSON(S) DETAILS (if more than one register separately)

Title: Mr. Mrs. Ms. Dr. Prof.

First Name: Middle Name: Last Name:

Sex: Male Female

Registration	Till 31 st August	Till 15 th Oct	Spot
<input type="checkbox"/> IHRSCON Member *	INR 10000	INR 12,000	INR 20,000
<input type="checkbox"/> Non IHRSCON Member	INR 13,000	INR 16,000	INR 25000
<input type="checkbox"/> Accompanying Person	INR 15,000	INR 18,000	INR 25000
<input type="checkbox"/> PG / Fellow / Nurse / Technician	INR 5,000	INR 7,500	INR 10000
<input type="checkbox"/> Industry	INR 18,000	INR 25,000	INR 30,000
<input type="checkbox"/> Foreign Delegates (SAARC)	INR 13,000	INR 16,000	INR 25000
<input type="checkbox"/> Foreign Delegates (Non-SAARC)	INR 20000	INR 30,000	INR 40,000

*Registration Fee will be same for overseas IHRSCON member

PAYMENT DETAILS: For Online Payment

Account Name: Indian Heart Rhythm Society
Account Number: 915010052914605
IFSC code: UTIB0003028
Bank Name: Axis Bank Ltd
Branch Name: Adhchini, New Delhi
 PAN No: AAAA16071L. GSTIN NO: 07AAAAI6071L1ZI.



Indian Heart Rhythm Society

15 ANNUAL CONFERENCE OF INDIAN HEART RHYTHM SOCIETY

(IHRSCON 2023 DELHI)

OCT 27 – 29, 2023

HOTEL-THE UMRAO, NEW DELHI



IHRSCON2023DELHI

DD to be made in favor of **Indian Heart Rhythm Society** payable at Delhi

DD No.....Dated..... Bank Name Amount

Pls send the filled Registration form to ihrscn2023delhi@gmail.com or to Conference Secretariat. along with the detail of confirmation of your payment of fee or DD.

Registration Guidelines:

- Registration mode will be offline
- Registration is mandatory to attend the Conference.
- Accompanying Person and Children are not allowed in the scientific sessions.
- If Accompanying Person are more than one, they have to fill a separate form.
- For Spot Registrations, delegate kit will be subject to availability.
- For Spot Registrations: Only online will be accepted.
- Kit is for registered delegate and will be handed over to him / her only.
- Kit, Program Book or any workshop material will not be disbursed after the conference.
- The registration confirmation letter will be sent within 15 days after the payment realization.
- Fellow/PG Students must submit a bonafide certificate from HOD/Institute along with the registration form.

Cheque will not be accepted in any case.

Registration Package will Include:

- Conference Fee + Conference Kit
- Complimentary Lunch (27,28,29th Oct 2023)
Dinner (27th, 28th Oct 2023).
- Visit to Trade Exhibition
- Registration Fee is inclusive of all Taxes

Cancellation Policy:

- The last date for receipt of cancellation request is Oct 15, 2023. The amount thereof will be refunded 30 days after the conference accordingly.

Conference Secretariat IHRSCON2023DELHI

Prof. Rakesh Yadav

Room No. 22, 7th Floor, Dept. of Cardiology, CTC,

AllMS, Ansari Nagar, New Delhi, India 110029 M:+91 9868026888

Email: ihrscn2023delhi@gmail.com Web: IHRSCON2023DELHI.IN