

REGISTRATION FORM

**National Symposium on “NEURAL PLASTICITY AND REPAIR”
and
Workshop on “EVALUATION OF PLASTICITY IN PAIN”**

18th – 19th October 2006

Department of Anatomy & Physiology
All India Institute of Medical Sciences
Ansari Nagar, New Delhi – 110029.

Name:

Designation:

Organization:

Address for correspondence:

Tel: ® (O) (M)

Email: Fax:

Title of the poster/talk:

I am interested in attending the symposium cum workshop as a registered delegate.

Date:

Signature

Signature and seal of Head of the Deptt. / Institution

Registration **upto 30th Sept. Rs.200/-** Spot Registration: **Rs.250/-**
Registration fees may be paid by Demand drafts / local cheques in favour of
“Neural Plasticity-2006” payable at **SBI**, New Delhi.