

REGISTRATION

CATEGORY	EARLY BIRD (15 Nov– 31 Dec 17)	ADVANCED (1 st Jan-15 th March 2018)	ON SPOT
General	Rs. 3000/-	Rs. 3500/-	Rs. 4000/-
IACBT Members	Rs. 2500/-	Rs. 3000/-	Rs.3500/-
UG & PG students	Rs. 2200/-	Rs. 2500/-	Rs. 3000/-
Single Day Registration	Rs. 1800	Rs. 2200/-	Rs. 2500/-

Information on Registration Fees

- Fees include Bag, Kit, Certificate, Lunch Coupons, Beverages
- UG & PG Students must show original Identity Card from their Colleges to avail registration fees benefits.
- Group Discount of 15% on the fee (3 or more people registering together from an organization/group)

PAYMENT INFORMATION

NEFT/Bank Transfer	Cheque/DD
Bank Details Account Name: Trauma Conclave AIIMS Account Type: Current Account Account Number: 37271156160 RTGS/ NEFT IFSC Code: SBIN0001536 Bank Name: State Bank of India Branch Address: Ansari Nagar, New Delhi –110029	Cheque/ DD to be drawn in favour of "Trauma Conclave AIIMS" payable at New Delhi, and to be mailed to: Dr. Sujata Satapathy Trauma Conclave Secretariat, 4085, 4 th Floor, Teaching Block, Dept. of Psychiatry, AIIMS, Ansari Nagar, New Delhi-110029 Phone: 011-26593244
IMPORTANT INFORMATION	Fill the Registration form and submit along with the fee (cheque and DD only). Submit the hard copy to the Conclave Secretariat. Submit the soft copy at traumaconclave@gmail.com . Keep the Bank payment FEE RECEIPT with you for receipt of registration kit & certificate

**First National Conclave on Psychological Trauma,
Child Protection, & Mental Illness**



Registration Form

TRAUMA CONCLAVE- 27-28 March 2018

AIIMS, NEW DELHI

Registration Category: _____

Name in BLOCK LETTERS: _____ Age: _____ Sex: _____
Male/Female/Other

Designation: _____

Affiliation: Name of the Organisation _____ Address: _____

City: _____ State: _____ Pin: _____

Mob No: _____

Email: _____

Whether abstract is submitted: Yes/No Whether full paper for award is submitted: Yes/No

If you are a student, whether your guide is aware of this submission: Yes/No

Payment Details-Delegate Category: _____ (See registration details)

DD/ Cheque Number _____

Dated: _____ INR: _____ Bank

Name: _____ Drawn in Favour

of: _____

NEFT/RTGS Receipt or Reference No _____

Dated _____ Bank _____

Payment Mode and Particulars: As given in the brochure

Fill in the Registration form and submit along with the fee (cheque and DD only) proof. Submit the hard copy to the Conclave Secretariat: Dr. SujataSatapathy/Dr.Renu Sharma, Trauma Conclave Secretariat, 4085, 4th Floor, Teaching Block, Dept. of Psychiatry, AIIMS, Ansari Nagar New Delhi-11002. Mobile: 09868397141, 09899380774, 08587951056, 08826719746 Telephone: 011-26593244

Submit the soft copy at traumaconclave@gmail.com

Visit Trauma Conclave Website: www.aiims.edu hyperlink: