



1ST NATIONAL CONFERENCE
EXPLORING THE HORIZON OF
DISASTER PREVENTION AND MANAGEMENT



On 21ST JANUARY 2012

REGISTRATION FORM

First Name: _____ **Middle Name** _____

Last Name _____

University/Organization: _____

Mailing Address _____

City: _____ **State/Province:** _____

Zip/Postal Code: _____ **Telephone:** _____

E-mail _____



CONFERENCE FEES

PLEASE CHECK APPROPRIATE REGISTRATION FEE:

- Student 250/-
- Masters In Hospital Administration
- Masters In Health Care Management
- P. G. Diploma In Healthcare Management

- Professional Delegates 500/-
- Doctors
- Administrative staff
- Nurses
- Management professionals (consultancy)
- Healthcare architects
- Any Other

Please specify: _____

Registration Fees (All fees listed in Indian currency) Accommodation not included.

PAYMENT METHOD: Registration fee must be paid through cash and demand draft
Registration receipt and further information will be confirmed in about 10 days of receipt of registration fee.

Demand Draft (DD) payable to aarambh

Cancellations/Changes and Refunds: Conference registration fee is non-refundable and non-transferable. Organizers reserve the right to accept or reject registration request. Your conference registration is deemed confirmed only after you collect a receipt.

For Registration Contact:

Arpita Chaudhuri: 8007961143

Rebecca Lal: 8390703799

Please mail completed registration form to: reg.quasar@gmail.com