

REGISTRATION FORM



October 17th - 19th, 2019

	(First Name)	(Middle Name) (L	ast Name)
Job Title:			
Hospital (Place o	of Work):		
Address			
Mobile:	Email:		
	ID Critical Care Board Re Max Super Specialt	view Course: October 17 y Hospital, Saket, New D	
Category	1"June-31" Augus	st 1st Sept -10th Oct, 20	19
APCCAMember	Rs. 4, 500	Rs. 6, 000	No.
Delegate	Rs. 6, 000		NO Spot
Accompanying	Rs. 3, 000	Rs. 3, 000	Registration

Rs. 3,000

Payment Details

Accompanying

Cheque / DD No Dated: Dated: Dated: Date___/___/ 2019

All cheques / DD to be made in favor of Asia Pacific Critical Care

RTGS details available on website **Note - Registration fee is non-refundable**

Rs. 3,000

Become
APCCA Life
Member @Rs 8500/Avail complementary
registration
SEPSIS CONGRESS 2019

Rs. 3,000

APCC Conference Secretariat

Ms. Poonam Joshi 7042269101 | Email: sepsis.congress@apcc-india.com | Info @apcc-India.com