



MUMBAI INSTAR - 2014

JW MARRIOTT, JUHU, MUMBAI

2ND NOVEMBER 2014

REGISTRATION FORM

First Name: _____ Last Name: _____

Gender: Male Female Member of INSTAR: Yes No

Qualification: _____ Organisation/Hospital: _____

Address: _____

Email: _____ Website: _____

Phone: _____ Mobile: _____

FEE STRUCTURE

	Fees before 10th Oct.	Fees after 10th Oct.
INSTAR Member	Rs. 1,500 only	Rs. 2,000 only
Non-member	Rs. 2,500 only	Rs. 3,000 only
P-G Student	Rs. 1,000/- only	Rs. 1,500/- only

Mode of Payment: Cheque Demand Draft Direct Bank Transfer

Cheque/DD Number: _____ Amount: _____

Dated: _____ Drawn on Bank: _____

Signature: _____

Date: _____

Bank A/C details

IFSC Code.....IBKL0000162
Beneficiary Bank.....IDBI Bank, Versova, Mumbai
Beneficiary Name.....INSTAR
Beneficiary Account No.....0162104000074643

Cheque/DD to be drawn favouring 'INSTAR' and couriered to **Corion Fertility Clinic**: 2nd Floor, Trans Avenue, Nr. Versova Telephone Exchange, Lokhandwala Rd., Andheri (W), Mumbai 400 053. Kindly mail bank transaction details to mumbaiinstar2014@gmail.com once you have transferred the amount.

Kindly write to mumbaiinstar2014@gmail.com to avail special accomodation rates at JW Marriott.

www.instar.co.in