



**DERMACON 2011**  
**39<sup>th</sup> National Conference of IADVL**  
**Gurgaon, Haryana**  
**3<sup>rd</sup> – 6<sup>th</sup> February, 2011**  
[www.dermacon2011.org](http://www.dermacon2011.org)



(Please use CAPITAL LETTERS)

**\* are mandatory fields.**

Name: Prof./ Dr./ Mr./ Mrs./ Ms.\* \_\_\_\_\_  
 (As required on Badge)

Address: \_\_\_\_\_

City/ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

IADVL Membership No.

Email: \_\_\_\_\_

Accompanying Persons 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**\*Registration Tariff**

| Category (Tick as applicable) | Upto 15th Sept. 2010 |          | Upto 31st Oct. 2010 |          | From 1st Nov. onwards |          |
|-------------------------------|----------------------|----------|---------------------|----------|-----------------------|----------|
|                               | CME                  | CONF.    | CME                 | CONF.    | CME                   | CONF.    |
| IADVL Members                 | Rs.1400              | Rs. 3600 | Rs. 1800            | Rs. 5000 | Rs. 2150              | Rs. 6450 |
| Non IADVL Members             | Rs.3000              | Rs.5000  | Rs. 3600            | Rs. 6450 | Rs. 4300              | Rs. 8600 |
| Accompanying persons          | Rs. 700              | Rs. 2150 | Rs. 1050            | Rs. 2600 | Rs. 1400              | Rs. 3600 |
| Postgraduate students         | Rs.1050              | Rs. 2150 | Rs. 1400            | Rs. 2850 | Rs. 1800              | Rs. 3600 |
| Corporate delegates           | Rs.3000              | Rs. 4300 | Rs. 3600            | Rs. 7200 | Rs. 4300              | Rs. 8600 |
| Foreign delegates             | US\$ 70              | US\$ 360 | US\$ 105            | US\$ 430 | US\$140               | US\$ 575 |
| SARAD delegates               | US\$ 70              | US\$ 140 | US\$ 105            | US\$ 180 | US\$140               | US\$ 250 |

**Note: Post Graduate Students should attach a letter from HOD.**

**Food Selection:** Vegetarian  Non-Veg

**PAYMENT MODE**

1. For Online payment through Credit Card please log onto: [www.dermacon2011.org](http://www.dermacon2011.org)

2. Bank Draft (ONLY for Indian Delegates). **\*Cheque not acceptable**

**Payment Details**

Category Rs. \_\_\_\_\_  
 CME Rs. \_\_\_\_\_  
 Registration Fee Rs. \_\_\_\_\_  
 Accompanying Person Fee Rs. \_\_\_\_\_  
**Total Rs. \_\_\_\_\_**

Payments should be made by demand draft in favour of "DERMACON 2011" payable at Rohtak.

Demand Draft No. \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_ Bank & branch name \_\_\_\_\_

Signature \_\_\_\_\_

Please mail this registration form duly filled to: **Conference Secretariat:**

**Dr. V. K. Jain**

Organizing Secretary

16/6J, Medical Campus, PGIMS, Rohtak- 124001, Haryana, India

Tel: 91-1262-213315, Telefax: 91-1262-213116,

Email: [dermacon2011@gmail.com](mailto:dermacon2011@gmail.com)