

Registration Form, ICFMT-2014

Name.....Sex.....

Designation.....

Affiliation/Institution.....

..

M.C.I. / State Registration no.....

Mailing address.....

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Telephone / Mobile no.....Email

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Accompanying person's details.....

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Details of Payment:

I am enclosing herewith demand draft/Cheque no.....Dated.....

Drawn on.....bank, for Rupees (In Words).....

..... Only.

Travel detail:

Date & Time of Arrival

Name:

Signature

- All payments can be made by at par cheques/demand drafts drawn in favour of “**ICFMT-2014**” payable at Greater Noida.
 - **Current A/C No - 08981131003561**
 - **IFS Code - ORBC010898**
 - **Address: Oriental Bank of Commerce Shop No. 12, Gamma Shopping complex, Sector-Gamma-1, Greater Noida, GB Nagar, U.P.**
- Kindly ensure that your name and contact no. is endorsed on the reverse of the cheque/demand draft.
- PG students must enclose a certificate from Head of the Department along with the registration form.
- Participants are requested to send the duly filled registration forms along with the requisite fee to **Dr. Mukesh Yadav (Organising Secretary) Prof. & Head Dept. of Forensic Medicine, SMS&R, Sharda University Greater Noida U.P. Pin: 201310**
- Scanned copies of registration form and details of Bank transfer can alternatively be mailed to drmukesh65@yahoo.co.in , icfmt14@gmail.com
- Registration form and other details can also be downloaded from the website: