

FHNO 2024

18th - 20th October 2024 | Venue - The Westin Mumbai Powai Lake

REGISTRATION FORM (PLEASE FILL IN UPPER CASE) Fields marked * are mandatory

Surname*: First Name*:

Postal Address*:

.....

City*: Pincode*: State*: Country*:

Membership No.*: Medical Council No.*:

Tel. (with area code): Residence: GST No.

Active E-mail ID*: Mobile*:

All future communications will be through email and mobile via SMS.

Preferred Room Partner (in case of twin sharing occupancy):

Category: (Please ✓ mark in the box)

NON RESIDENTIAL REGISTRATION

- FHNO Member
- Non Member
- P G Student
- Accompanying Person

ACCOMMODATION PACKAGE

- 3 NIGHTS 4 DAYS 2 NIGHTS 3 DAYS
- Single Occupancy
- Twin Sharing
- Delegate + Accompanying Person

Mode of Payment: Cheque / DD No. Dated Drawn on

..... Amount Branch

Please send the duly filled registration form along with DD / Cheque to:
Conference Secretariat: Vama Events Pvt. Ltd.

Kohinoor Square Phase I, B Wing, Office no.1004, 10th Floor, N.C. Kelkar Road, Shivaji Park Dadar West Mumbai - 400 028
Tel. No. 022 46052832 | Email : conferences@vamaevents.com