

12th

Biennial Conference of
Pakistan Society of
Nephrology 2019
1st, 2nd & 3rd MARCH



Venue: Pearl Continental Hotel, Lahore.

REGISTRATION FORM

Name: _____

Qualification: _____ PMDC No. _____

Postal Address: _____

Institute: _____ City: _____

Mobile No. _____ Telephone No. _____

Email: _____ Sponsored by: _____

Accompanying Person Name: _____

Registration Fee (in PKRs)

	Fee Before (15 th Jan, 2019)	Fee After (15 th Jan, 2019)
Consultant	PKRs. 8,000/- <input type="checkbox"/>	PKRs. 10,000/- <input type="checkbox"/>
PGs / Residents <i>(A letter of PG ship from HOD will be required)</i>	PKRs. 03,000/- <input type="checkbox"/>	PKRs. 04,000/- <input type="checkbox"/>
Foreign Delegates	US \$ 200 <input type="checkbox"/>	US \$ 250 <input type="checkbox"/>
Accompanying Person <i>(without bag, entitled for meals only)</i>	PKRs. 05,000/- <input type="checkbox"/>	PKRs. 05,000/- <input type="checkbox"/>
Pharma Delegates <i>(without bag, entitled for meals only)</i>	PKRs. 05,000/- <input type="checkbox"/>	PKRs. 05,000/- <input type="checkbox"/>
Total Payable Amount	<input type="text"/> Cash: <input type="text"/>	Cheque: <input type="text"/> Draft: <input type="text"/>

Signature: _____

Date: _____

12th Biennial Conference Secretariat
Department of Nephrology
Shaikh Zayed Hospital, Lahore.
E-mail: info@psn2019.com

