

# registration form

INDIAN SOCIETY OF  
HIP & KNEE SURGEONS



Registered Charity in Mumbai, India

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Name: ..... (As preferred on badge & certificate)

Designation : ..... Age: ..... [ ] Male [ ] Female (Tick appropriate box)

Mailing Address: .....

..... E-mail: .....

Mobile: ..... Tel.: ..... Fax: .....  
(Add area code)

Registration Category: [ ] ISHKS Member [ ] Non Member [ ] PG Student      Membership No.: .....

Certification of PG Status enclosed: [ ] Yes [ ] No      Abstract Submitted: [ ] Yes [ ] No      If yes, by [ ] E-mail [ ] Hard Copy

Title: .....

Please find enclosed a local Cheque / D. D. No. .... dated ..... of Rs. ....

..... from ..... Bank favouring **'ISHKS' payable at Mumbai.**

If you pay 'At Par' in the HDFC Bank branch in your town, please draw the cheque in favour of **'ISHKS - HDFC Bank A/c No. 2271000046561'** and email details to - [vamahospitality@hotmail.com](mailto:vamahospitality@hotmail.com) mentioning Name, Amount and Cheque No.

Please send the registration form duly filled along with cheque / demand draft to : **Vama Events**, 34, 1st Floor, Keshav Bhavan, Lady Jamshedji Road, Opposite Ashray Hotel, Above Shiv Sena Shakha, Mumbai 400 016. Tel: 2438 3498 Telefax: 2438 3499

Please submit abstract on a separate sheet, A 4 size, in ARIAL font, Size 12 or by email to [vamahospitality@hotmail.com](mailto:vamahospitality@hotmail.com)