

Mid Term Conference of the Strabismus & Paediatric Ophthalmology Society of India (SPOSI) - 5th April, 2015

Name (in Block Letter)	:	<input type="text"/>
Designation	:	<input type="text"/>
Institution	:	<input type="text"/>
Address	:	<input type="text"/>
		<input type="text"/>
		<input type="text"/>
Telephone / Mobile Number	:	<input type="text"/>
E-mail Address	:	<input type="text"/>
Method of Payment	:	<input type="text"/>

Registration Charges

Date	Members	Non-members	PG students
Upto 15 th March 2015	Rs. 600	Rs. 800	Rs. 500
After 15 th March 2015	Rs. 700	Rs. 900	Rs. 600

Demand Draft or an at par cheques must be in favour of :
 "SKKMT-SPOSI Midterm" payable at Coimbatore
 For net banking and other clarifications please write to hr.ldh@sankaraeye.com

Registration Form to be sent to:

Dr Madhu Karna, Organizing Secretary,
 SPOSI Mid Term Conference,
 Sankara Eye Hospital,
 Vipul World, Bhanohar, Post Dakha,
 Ferozpur Road, Ludhiana 141101, Punjab.

SPOSI Account details are as follows:

Name of the Account	:	SKKMT SPOSI Midterm
Account Number	:	915010008348733
Name of Bank	:	Axis Bank Ltd.,
Branch	:	D. B. Road, R. S. Puram, Coimbatore
Nature of Account	:	Savings Bank
IFSC Code	:	UTIB00000563