

## Registration Form

**Office use only:** \_\_\_\_\_

**Registration No:** \_\_\_\_\_

**Receipt No:** \_\_\_\_\_

(Please fill in block/boxes as applicable)

**Title:** Dr./Prof./Mr./Mrs./Ms.

**Name** \_\_\_\_\_  
(It will appear on your badge and Certificate, as it is)

**Gender:** Male  Female  **Specialization/ Research Focus:** \_\_\_\_\_

**Designation:** \_\_\_\_\_ **Registration category:** Faculty  Student

**Presentation:** Yes  No

**Presentation Type:** Invited talk  Oral Presentation  Poster Presentation

**Organization** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Pin:** \_\_\_\_\_ **E-Mail (Mandatory):** \_\_\_\_\_

**Mobile No:** \_\_\_\_\_

**No. of Accompanying persons:** \_\_\_\_\_

**Name of Accompanying Person: 1.** \_\_\_\_\_

**2.** \_\_\_\_\_ **3.** \_\_\_\_\_

**Signature:** \_\_\_\_\_

### Registration Fee:

Category	Before October 15, 2017	Before December 31, 2017	After January 01, 2018
<b>Participants from India</b>			
Faculty and other Delegates	INR 4500	INR 5500	INR 7000
Ph.D. Students and Research Fellows	INR 2500	INR 3000	INR 4000
Accompanying Person	INR 3000	INR 3500	INR 4500
Industry	INR 15,000		
<b>Overseas Delegates</b>			
Faculty and other Delegates	USD 350	USD 400	USD 500
Students	USD 200	USD 250	USD 300
Accompanying Person	USD 150	USD 200	USD 250
Registration is Compulsory •One day registration will be available (Participants from India: INR 2000, Overseas participants USD 150) •Certificate from Departmental Head/ Institutional Head should be Submitted form registration in Student/Research Fellow Category			

### Bank Transfer Details:

**Account Name:** International Conference on Cancer Prevention and Treatment **Account No:** 36315973400  
**Name of Bank:** State Bank of India, IIT Campus, Chennai- 600036 **IFSC Code:** SBIN0001055  
**MICR Code:** 600002018 **SWIFT Codes:** SBININBB453

**NEFT Transfer Details:** \_\_\_\_\_

D.D./cheque should be drawn on: **“International Conference on Cancer prevention and Treatment “Payable at Chennai.**

**Cheque/DD No:** - \_\_\_\_\_ **Dated:** \_\_\_\_\_

**Drawee Bank and Branch:** \_\_\_\_\_

**Filled registration form should be sent to: Dr. Karunakaran, Department of Biotechnology, IIT Madras, Chennai-600036.**

### Note:

1. Please send the filled form along with Cheque /DD, to the conference secretariat.
2. Please mention your Name, City and Mobile No. on the backside of Cheque/DD.
3. Registration confirmation will be sent by e-mail only after receiving the duly filled Registration form along with the registration fees and realization of cheque/D.D.
4. The official receipt of the registration will be handed over to you at the registration desk during the conference.
5. Student delegates **MUST** submit proof and a letter signed by Head of the Institution /Department /Supervisor on the Institute letter head.
6. In case of bank transfer, details should be communicated by e-mail to the conference secretariat.

**Registration fees includes:** Participation in inaugural function, participation in all scientific sessions during the conference, conference kit, Conference book and other educational materials, Lunch on 8<sup>th</sup> -11<sup>th</sup> February 2018 at Westin hotel.