



ANNUAL CONFERENCE OF THE INTRAOCULAR
IMPLANT & REFRACTIVE SOCIETY, INDIA
Hotel Le Meridien, New Delhi
August 13th & 14th, 2011



REGISTRATION FORM
PLEASE WRITE CLEARLY IN CAPITAL LETTERS ONLY

Name _____

IIRSI : Member / Non-Member / Membership No. _____ Nationality _____

Address _____

(City) _____ (Pincode) _____ (Country) _____

Mobile No.: _____ E.mail : _____

Accompanying person (if Registered):

Name _____

Registration Fee Details :

Enclosed At Par Cheque / Demand Draft No. _____ Dated _____ for Rs. _____

For Rupees (In Words) _____

Drawn on (Name of Bank) _____

Favouring **"INTRA OCULAR IMPLANT & REFRACTIVE SOCIETY INDIA"** payable at **New Delhi**

Send to

Conference Secretariat
Centre for Sight
B-5 /24 Safdarjung Enclave
New Delhi 110029 India

Organizing Secretaries
Dr Charu Khurana
Dr Hemlata Gupta
Dr Ramendra Bakshi
Dr. Ritika Sachdev

REGISTRATION
MANAGED BY

**Syntho
Pharmaceuticals
Pvt. Ltd.**
AN ISO 9001:2008 COMPANY
www.eyepharma.in

FOR OFFICE USE :

REGISTRATION NO :	RECEIPT NO :
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Abstracts: Last date 31st March, 2011

Free Papers: on cataract & refractive surgery (200 words including Purpose, Methods, Results & Conclusions)

Live Surgery: Videos of cataract & refractive surgery techniques & complications (Maximum duration 5 minutes)

■ **Early Bird Registration closes:** 31st March, 2011 ■ Online Submission at iirsidelhi2011@gmail.com

■ **First 50 Registration Free**

For further details please contact the Organizing Secretary at iirsidelhi2011@gmail.com

Registration Fee Detail	Category	31st March, 2011	15th June, 2011	Spot Registration
	iirsi Members	Rs. 700	Rs. 900	Rs. 1200
	Non Members	Rs. 900	Rs. 1200	Rs. 1500
	Associate Delegates	Rs. 700	Rs. 900	Rs. 1200
	Post Graduate Student	Rs. 500	Rs. 700	Rs. 900
	Foreign Delegates	US\$ 150	US\$ 200	US\$ 250

Demand Draft in favor of

"INTRA OCULAR IMPLANT & REFRACTIVE SOCIETY INDIA", Payable at **New Delhi**