



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

ANNUAL CONFERENCE 2011

**Refining
Vision**

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 :

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

| Registration Fee Detail | Category | 7th August, 2011 | Spot Registration |
|------------------------------|----------------------|------------------|-------------------|
| | IIRSI Members | | Rs. 900 |
| Non Members | | Rs. 1200 | Rs. 1500 |
| Associate Delegates | | Rs. 900 | Rs. 1200 |
| Post Graduate Student | | Rs. 700 | Rs. 900 |
| Foreign Delegates | | US\$ 200 | US\$ 250 |

Demand Draft in favor of

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