



2018 - DAMAN

27-29 April 2018 | Hotel Mirasol Resort.

# REGISTRATION FORM

				FIRST NAME						
				MIDDLE NAME						
				LAST NAME						

**Mailing Address**

**City** \_\_\_\_\_ **State** \_\_\_\_\_

**Pin** \_\_\_\_\_ **Mobile** \_\_\_\_\_

**E-mail**

ACSI Member    CDCON Member    Non Member (Dermatologist only)

**ACSI Membership No.** \_\_\_\_\_ **CDCON Membership No.** \_\_\_\_\_

**Medical Council No.** \_\_\_\_\_

**I would like to register for the following :**

Demonstration Workshop    Hands On Workshop    Conference

**PLEASE CHOOSE THE WORKSHOPS YOU WISH TO ATTEND.**

**DEMONSTRATION WORKSHOPS (Registration Fees For Workshops Are For Each Workshop)**

- Hair Transplant    Laser I    Vaginal Rejuvenation    Periorbital Rejuvenation
- Nail Surgery    Laser II    Liposuction    Dermatologist Assistant
- Vitiligo surgery    Surgical Pearls    3D Workshops    Research Methodology
- Acne Scar Surgery    Platelet Rich Plasma    Pediatric Laser & Surgery    Photo Therapy & Excimer
- Advance Chemical Peels    Non-surgical Body Contouring    MiniMBA - Advance Practice Managemnet

**HANDS ON WORKSHOPS (Registration Fees For Workshops Are For Each Workshop)**

- Botulinum Toxin Basics    Botulinum Toxin Advanced    Fillers Basics    Fillers Advanced    Threads

**Note : Please refer the workshop timetable before selecting the workshops.**

**Registration Fee :** \_\_\_\_\_

**Workshop Demonstration Fees :** \_\_\_\_\_

**Hands On Workshop Fees :** \_\_\_\_\_

**Accompanying Person (No. of persons) :** \_\_\_\_\_

**Amount :** \_\_\_\_\_

**Total Amount :** \_\_\_\_\_

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

**Drawn On :** \_\_\_\_\_

**Details of Electronic Transfer / Credit Card Payment :**

Scan copy of duly filled Registration form to be sent to [acsicondaman@gmail.com](mailto:acsicondaman@gmail.com)

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

## Registration Details

### Conference Registration Fees

Category	Early Bird Upto 15th Feb. 2018	Late After 15th Feb. 2018	After 15th March 2018	Spot Registration
ACSI & CDCON Member	7000/-	8500/-	10000/-	If available
Non ACSI Member	8500/-	10000/-	11500/-	If available
PG Student*	6000/-	7500/-	8500/-	If available
Accompanying Person	6000/-	7500/-	8500/-	If available

### Demonstration Workshop Registration Fees Each Workshop (Limited Seats)

Category	Early Bird Upto 15th Feb. 2018	Late After 15th Feb. 2018	Spot Registration
ACSI & CDCON Member	2000/-	3000/-	If available
Non ACSI Member	3000/-	4000/-	If available
PG Student*	1500/-	2500/-	If available

### Hands-on Workshop Registration Fees Each Workshop (Limited Seats)

Category	Early Bird Upto 15th Feb. 2018	Late After 15th Feb. 2018	Spot Registration
ACSI & CDCON Member	5000/-	6000/-	If available
Non ACSI Member	7500/-	8500/-	If available
PG Student*	4000/-	5000/-	If available

\*PG Student must submit letter from HOD & photocopy of MCI Registration Certificate along with registration form

\*Delegates who want to register please attach Photocopy of MCI Registration Certificate & Degree Certificate

\*CME Credit Points will be awarded to delegate accordingly to MCI guidelines.

\* Registration is open for only Dermatologists & Plastic Surgeons

\* Limited seats available and will be strictly on first come first serve basis.

\* The fees for Demonstration & Hands-on Workshops is in addition to the conference registration fees, So kindly add that amount while making payment.

\* If you have any query regarding the Registration, please write to [acsicondaman@gmail.com](mailto:acsicondaman@gmail.com)

\* Please note that it is essential to have a functional Email ID and Mobile Number as all communication regarding your Registration will be done by Email & SMS only

## Payment Details

**Demand Draft / At Par Cheque to be drawn in favour of "CDCON FOUNDATION"**

payable at Ahmedabad. While paying through DD/Cheque, write your Name on backside of the same.

Please send your duly filled form along with payment to the **Conference Secretariat**.

### BANK TRANSFER

**Name of Account :** CDCON FOUNDATION  
**Account No. :** 575401010050445  
**Bank Name :** Union Bank of India  
**Branch :** Isanpur, Ahmedabad Branch  
**IFSC Code :** UBIN0557544  
**PAN No. :** AACTC2205R

## Conference Secretariat

**Mr. Pravin Shinde**

**AURA EVENTS & PRODUCTIONS**

Shop No. 8, Motimahal CHS, 90 Feet Road, Sane Guruji Nagar, Mulund (E), Mumbai - 400081.95 003

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