REGISTRATION FORM

(Pre-Conference Seed Workshop)

AIRWAY-2018
The Airway Congress
www.amf.org.in

Name: _____ Designation _____ Mobile _____

Email _____

Institution/ Hospital/ Place of Work: _____

AMF member*: YES/ NO

Pre-Conference Seed Workshop Registration Charges* – Rs. 2500/- ☐

COMPLETE SCHEDULE OF AIRWAY - 2018

1. Pre-Conference Seed Workshop (*80 Seats):* September 2-3, 2017 at **Lady Hardinge Medical College, New Delhi** will *include Didactics and Hands-on exposure in the 'Must Know' areas of Airway management; Details @ website)*

2. Main Congress: February 10-11, 2018 at **Delhi** will have **FOUR Specialized Workshops** on **February 10, 2018**, Thoracic Airway, Airway for Oral-maxillofacial surgeries and Trauma, Ultrasound for airway management and Airway in ICU and Critical Care *(with a maximum of ANY TWO available to any participant)*. On **February 11, 2018,** there will be CME.

(*AMF members and Seed Workshop Delegates will get Discounted Registration for the Specialized Workshops and CME during the Main Congress on February 10-11, 2018)

Modes of Payment:

1. Online ☐
2. **Bank Details** for Electronic Transfer (NEFT/ RTGS): ☐
   Account name: AIRWAYMANAGEMENTFOUNDATION;
   Account Type: Savings Account; Account No.: 235301000067; IFSC Code: ICIC0002353;
   Bank Name and Address: ICICI Bank Ltd, 3/17A, Asaf Ali Road, New Delhi-110002
3. Cheque/ DD: in Favor of **AIRWAYMANAGEMENTFOUNDATION** ☐

(No……., Dated…… Drawn on……

4. Cash ☐

Filled forms along with Cheque/ DD can be sent to: Mr. Sumit (+91-9654088217)
Room No 302, B L Taneja Block, Maulana Azad Medical College New Delhi- 110002