

PCOD CONCLAVE 2016

REGISTRATION FORM

(* fields are mandatory)

Name*

Age* DOB (dd-mm-yyyy)..... Gender*

Designation & Affiliation (Institution or Workplace)*
.....

Mailing Address*
.....

City* Country* Pin Code.....

Mobile*

Email*

Payment & Payment Options*

For INR..... In words INR

By Cash

By Cheque favoring “THE SOURCE”, and payable at Delhi and Gurgaon

Address for posting Cheque and completed Registration Form:

*THE SOURCE, C-2246 (Basement & Ground floor), Sushant Lok -I, “Suhridaya”,
Block-C, Opposite Chiranjiv Park, Near Gold Souk Mall. Gurgaon-122009, Haryana, India.*

Please fill the Cheque details:

Drawn on (Bank Name)..... Branch.....
Cheque Number..... Dated.....

By Net Banking (5% Discount on Online Payment)

Net Banking Details:

Beneficiary Name: **THE SOURCE** Bank Name: **HDFC Bank Ltd.**
Branch: **The Peach Tree, C-Block, Sushant Lok-I, Gurgaon**
Account Number: **26862320000062** Type of Account: **Current**
IFS Code: **HDFC0002686**

Web: www.dermasourceindia.com
Email: info@dermasourceindia.com