



CENTRAL INDIA INSTITUTE OF MEDICAL SCIENCE

88/2, Bajaj Nagar, NAGPUR – 440 010

Introduction to Neuropsychology Workshop

REGISTRATION FORM

(All the information required to fill in capital letters only)

Participant Information:

1. Name of Participant:

2. Gender: Male Female

3. Address:

City:

Pin Code:

4. E-Mail Address: _____

5. Mobile No.:

Telephone No.

6. Marital Status: Single / Married

7. College Name/ Name of Institution:

8. Student Faculty Other

9. Educational Qualification:

10. Designation:

Payment Method:

Cash or DD/ Cheque in favour of "Central India Institute of Medical Sciences" payable at Nagpur.

Registration Fees

Early Bird till 20th November – Rs. 1000/-

After 20th November – Rs. 1500/-

How to apply:

Detailed application form should be submitted at the CIIMS Hospital, 88/2, Bajaj Nagar, NAGPUR – 440 010

(Note: This application form is also available at CIIMS website: www.ciimsnagpur.com)

Contact Details : Mrs. Sayali Kulkarni (Maste)
Cell No: 9370699409
Email : sayalimaste@gmail.com