



STEM CELL SOCIETY

Registration No. guj/2176/gandhinagar

4th Annual Conference

Registration Form



Name: First _____ Surname _____

Prefix: Dr. Prof. Mr. Ms.

Qualifications: _____

Institution: _____

Address: _____

Designation: _____

Email: _____

Mobile: _____ Office Tel: _____

Registration Fee :

Indian Delegate - INR 3000/-

International Delegate - USD 100/-

Indian PG Student - INR 500/-

International PG Student - USD 50/-

Payment Method: Please select desired method mode and fill the details below.

Cheque: to be drawn in the name of “**Stem Cell Society**” and couriered to the following address:

Dr. Rohit Kulkarni

Unit No 10, Andheri Industrial Estate,
Off Veera Desai Road, Andheri West,
Mumbai, Maharashtra – 400053.

Mob.: +91 9820526618

Bank Transfer: the details for bank transfer are as follows:

Name: Stem Cell Society

Bank: IDBI Bank

Branch: Sion Branch

Account type: Current

A/C No.: 0188102000014243

IFSC Code: IBKL0000188

Cheque / DD No. _____

Transaction Date: _____

Issue Bank Name: _____

UTR No.: _____

Please scan and mail this form to stemcellsocietyofindia@gmail.com