

Nutrition & Wellness 2018 Conference & Awards

9th December, 2018 Hotel The Orchid, Mumbai

CIMS
Medica

DELEGATE REGISTRATION FORM

I/ We would like to register/send the following person/s as delegate to the conference under the following category:

Organization name:			
Postal address:			
City:	Postal code:	State:	Country:
Ph:	Mob:		Fax:
Name of person/s	Designation	Mobile:	Email

Delegate Registration

- ₹1500/- plus GST per delegate
- ₹2500/- plus GST for 2 delegates
- No. of Delegates _____
- Registration Fees ₹ _____

*Includes access to Awards Night, Networking Meet with VVIPs & Key Dignitaries, Networking & Cocktail Dinner, Certificate of Attendance.

Terms & Condition

1. Registration form has to be duly filled, signed, stamped (Company stamp) by the authorized person and sent along with the delegate fee. Admission to the conference cannot be guaranteed if the payment has not been received by CIMS Medica India Private Limited. Payment must be received prior to the conference date. In any case of cancellation, delegate fee will not be refunded but can be credited to future conference within next six months. Delegate fee includes lunch, refreshments & complete set of documents. CIMS Medica is not responsible for covering airfare, hotel or other travel cost incurred by clients. Delegate fee is exclusive of all taxes. Where applicable clients shall deduct the appropriate tax deducted at source (TDS) at the time of payment and should thereafter furnish us the TDS Certificate within one month from the end of the month during tax is deducted. All payments are requested on or before 5 days after the invoice have been received. All disputes have been subjected to Mumbai Jurisdiction only.

Authorised signatory (Signature of the person attending/ nominating the delegates along with the company stamp)

Payment mode:

Demand Draft payment: In favour of **CIMS Medica India Pvt Ltd.** payable at Mumbai, India

Bank name	The Hongkong and Shanghai Banking Corporation Limited
Bank address	No. 7, Mahatma Gandhi Road, Bangalore-560 001
Account no	072-118300-002
IFSC code	HSBC0560002
MICR code	560039002
PAN no	AACCC4749H
Beneficiary name	CIMS MEDICA INDIA PVT LTD

Note: Please send the fill up form along with the delegate fee to:

CIMS Medica India Pvt. Ltd. Boomerang (Kanakia Spaces), Wing-B1, 403 , Chandivali farm Road, Chandivali, Powai , Mumbai - 400 072, India. Mobile – 99871 19177 Email: promotions@cims.co.in