



# THE HOSPITAL MANAGEMENT SHOW & CIMS HEALTHCARE EXCELLENCE AWARDS



23<sup>rd</sup> - 24<sup>th</sup> July, 2017, Hotel ITC Grand Maratha, Mumbai

www.hmcindia.in

## Delegate Registration Form

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

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

Delegate Pass		VIP Pass	
<b>23<sup>rd</sup> July</b>	<b>24<sup>th</sup> July</b>	<b>23<sup>rd</sup> &amp; 24<sup>th</sup> July</b>	<b>23<sup>rd</sup> &amp; 24<sup>th</sup> July</b>
Conference only	Conference only	Conference + Awards Ceremony	Conference + Awards Ceremony
(Breakfast + Lunch + Tea + Conference Certificate)	(Breakfast + Lunch + Conference Certificate)	(All meals + Conference Certificate)	(All meals + 1 Night Stay at ITC Grand Maratha + Conference Certificate)
<b>INR 4000/- *</b>	<b>INR 3000/- *</b>	<b>INR 8500/- *</b>	<b>INR 12,700/- *</b>

\*Additional 15% Service tax will be applicable

### Terms & Condition

- 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 UBM Medica India Private Limited. Payment must be received prior to the conference date. In any case, 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. UBM 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 **UBM Medica India Pvt Ltd.** payable at Mumbai, India

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

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

Aparna Mayekar: - **CIMS Medica India Pvt. Ltd.** Boomerang (Kanakia Spaces), Wing-B1, 403 , Chandiwali farm Road, Chandiwali, Powai , Mumbai - 400 072, India. Mobile – 9930937020 Email: [events@cims.co.in](mailto:events@cims.co.in) Web: [www.hmcindia.in](http://www.hmcindia.in)