



' 13th ISPRP - NATIONAL CONFERENCE '

7th, 8th, & 9th August 2020 @ Al-Hind Calicut tower, Calicut

For office use only
Reg no:
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REGISTRATION FORM

Please affix a
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Please fill in block letters:

Name :Dr./Mr./Mrs./Ms.....

Address:.....

.....City/State:.....Pin:.....

Mobile:.....Email:.....

Arrival Date& Time:.....

Scientific papers: E-poster Nil (please select the appropriate one)

Title of presentation/E-poster

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I am enclosing here with the cheque / DD No.....Dated.....

Drawn on:.....Bank & branch.....

For Rs.....(Rupees.....)

In favor of **“ISPRP 2020”** Payable at Mahe.

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For direct fund transfer and queries please contact **Dr. Jilu Abraham- +91-9961642654**

For any other queries please contact **Dr.Nanditha Chandran - + 91- 9686785754**

Last date for the receipt of completed registration form & payment declaration is 10th June 2020

Please mail this registration form and payment declaration duly filled to

Dr.Anil Melath

Organizing Chairman ,ISPRP 2020

Dept.of Periodontics

Mahe Institute of Dental Sciences (MINDS)

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