





Registration Form

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For Office use only: Receip	ot:	Date:	Reg No:	
Date:			Signature	
Total amount in words:				
Drawn on Bank:		Branch:		
Cheque / DD no:		_Date:		
Payment Details:				
(2)		Age:	Gender : M	F
(1)		Age:	Gender : M	F
Accompanying Person(s)				
*State Medical Council Reg No.	(Ex: TNMC 12345)			••••••
Country:	*E-mail:		*Mobile:	
City:	Pin Code:	State:		
Postal Address:				
*Designation:		Departi	:ment":	
Hospital/Institution				
*Name(PLEASE FILL IN CAPITAL LETTERS AS TO APPEAR II			Gender : M	F
Prof. Dr. Mr. M	Ir Mrs			

Mode of Payment

Cheque/DD to be drawn in favour of "Trivandrum OBGYN Club Online Registration: Logon to www.tvmobgyn.com

Please submit the duly filled form and payment to the conference secretariat Address for Communication: Conference Secretariat Advances 2025 KJK Hospital, Nalanchira, Trivandrum, Kerala, India



Jayalal R S: 9645446067 | Mail: tvmobgyn@gmail.com | Website: www.tvmobgyn.com | advances2025@gmail.com

REGISTRATION Tariff

WORKSHOP 4TH April 2025 (Hall A) Obstetrics, Labour and fetal medicine	Early bird up to 28-02-2025	Spot
CLINICIANS	₹ 4500	₹5500
PG STUDENTS	₹3000	₹4000
WORKSHOR 4TH April 2025 (Hall B) Gynec endoscopy Surgical video workshop	Early bird up to 28-02-2025	Spot
CLINICIANS	₹4500	₹5500
PG STUDENTS	₹3000	₹4000
Conference Registration Fee 21/2 days	Early bird up to 28-02-2025	Spot
CLINICIANS	₹8500	₹9500
PG STUDENTS	₹7500	₹8500
Conference & Workshop Registration Fee 3 days	Early bird up to 28-02-2025	Spot
CLINICIANS	₹12000	₹13000
PG STUDENTS	₹9000	₹10000
ACCOMODATION AT HYATT REGENCY (VENUE	Rate	
SINGLE (1 Night)	₹ 7616	
DOUBLE (1 Night)	₹ 9204	
TRIPPLE (1 Night)	₹10974	

• Registration for Accompanying Person Rs.3000 Per Day

Rs.3000 Per Banquet

• Free For Children Below 5years Of Age

Cancellation Policy 20% will be deducted before 15-3-25 and no refund after 15-3-25