

ATLS® Instructor Course, New Delhi
REGISTRATION FORM - ATLS – INDIA

Please fill this form and mail it with your non-refundable payment of fee to:

Prof. M.C Misra
ATLS Program Director
Chief, JPN Apex Trauma Centre
AIIMS, Raj Nagar, New Delhi-110029.
Contact No.: +91-11-26731270, 9868398538 / 7705 / 7701
Fax: - 011-26106826

Paste your recent
passport size
photograph

Please give your option for ATLS Instructor Course:

OPTION A

OPTION B

PLEASE PROVIDE THE FOLLOWING CONTACT INFORMATION:

Name:

Title:

Age:

Designation:

Specialty:

Year of Graduation:

Post Graduate Qualification

Year of Post Graduation:

Working Hospital:

Full Address

For communication:

Zip/Postal Code:	
Country:	
Work Phone:	
Fax:	
Mobile:	
E-Mail:-	

Date of ATLS Provider course attended along with the registration number:

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Date of any ATLS Instructor course attended along with the registration number:

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Please deposit the fees through Bank Draft in favour of “**ATLS – India**” payable at Delhi. No form will be accepted without full payment.

Provide details of Bank Draft No: Dated: Amount Rs:

Drawn on:

Signature:

COURSE FEE DETAILS:

All Payments made towards the registration of ATLS Instructor Course after 01 March, 2016 shall be charged as the fee details given below irrespective of course date for any of the instructor course.

ATLS Instructor Course	Participants from India & SAARC Countries.	Doctors in Govt. Services & Armed forces§	Resident Doctors	Other Foreign Nationals
	Rs 10000	Rs. 7500 §	Rs. 5000 §	USD 200

§ **Submit** proof along with the registration form.