

ATLS® Provider Course, BVD to be University, Pune  
**REGISTRATION FORM**

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

**BVDU AHA International Training Center,  
First Floor, Bharati Vidyapeeth Deemed to be  
University Dental College and Hospital  
Bharati Vidyapeeth Education Complex,  
Dhankawadi, Pune 411043  
Mob: +91- 9371021318  
E-mail: [ahaitc.bvdu@bharatividyaapeeth.edu](mailto:ahaitc.bvdu@bharatividyaapeeth.edu)**

and [atls.bvdu@bharatividyaapeeth.edu](mailto:atls.bvdu@bharatividyaapeeth.edu)

Paste your recent  
passport size  
photograph

Please give your option for ATLS Provider

Course: OPTION A

OPTION B

**PLEASE PROVIDE THE FOLLOWING CONTACT INFORMATION:**

Name:	<input type="text"/>
Title:	<input type="text"/>
Age:	<input type="text"/>
Designation:	<input type="text"/>
Specialty:	<input type="text"/>
Year of Graduation:	<input type="text"/>
Post Graduate Qualification:	<input type="text"/>
Year of Post Graduation:	<input type="text"/>
Hospital:	<input type="text"/>
Full Address For communication:	<input type="text"/>

Zip/Postal Code

Country:

Work Phone:

Fax:

Mobile:

E-Mail:

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

Are you interested in and available for the Instructor course? (Please note that you must successfully complete the Student Course and be identified as having instructor potential to attend the Instructor Course)

Yes  No

Please deposit the fees through Bank draft in favor of " **B V D to be University AHA ITC Pune**"

Provide details of Bank Draft No:..... Dated:..... Drawn on:.....

Or it can be paid by direct transfer as per the following details:

**Name:** - B V D to be University AHA ITC Pune

**A/c No.** – 3265101004444

**Bank:** - Canara Bank, **Branch:-** Pune

**Account Type:** - Saving A/C

**RTGS / NEFT Code:** CNRB0003265

No form will be accepted without full payment.



125881872004444@cnrb

Signature:

**COURSE FEE DETAILS:**

ATLS Provider Course 1. Interns / Residents 2. Faculty from Bharati Vidyapeeth Deemed University)	<b>Rs. 18000/-</b>	<b>Rs. 3240 (18% GST)</b>	<b>Total Fees Rs. 21,240/-</b>
ATLS Provider Course Participants from India & SAARC Countries	<b>Rs. 19000/-</b>	<b>Rs. 3420 (18% GST)</b>	<b>Total Fees Rs. 22,420/-</b>
ATLS Provider Course Other Foreign Nationals	<b>600 USD</b>		

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