

MIDCON

SUNDAY, 7TH JULY 2019
20TH MID-TERM CLINICAL CONFERENCE OF
WEST BENGAL ORTHOPAEDIC ASSOCIATION



20
19

DATE: _____

NAME: DR. _____

SPOUSE NAME _____

ADDRESS: _____

PIN CODE: _____ CONT.NO: _____

E-MAIL: _____

MEMBERSHIP NO: _____ SENIOR CITIZEN: _____

MODE OF PAYMENT: CASH/CARD/CHEQUE/ONLINE _____

DETAILS: _____

SIGNATURE: _____

SENIOR WBOA MEMBERS (ABOVE 65YRS.) ARE EXEMPTED FROM ALL CHARGES

A/C NAME: WBOA CME WORKSHOP CONFERENCE

BANK NAME: STATE BANK OF INDIA A/C NO: 35715775728

BRANCH: PBB, SALT LAKE, IFSC: SBIN004204, SWIFT: SBININBB334

After online payment please intimate us to: wboamail@gmail.com

LAST DATE OF ABSTRACT SUBMISSION FOR MIDCON 2019 IS

15TH JUNE 2019 TO “ scientificwboa@gmail.com ”