



In Association with



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8th - 10th AUGUST 2025 | ALL INDIA INSTITUTE OF MEDICAL SCIENCES, MANGALAGIRI
VIJAYAWADA, ANDHRA PRADESH

REGISTRATION FORM

Registration No: Receipt No: (office use only)**PERSONAL DETAILS:**Prof. ☐Dr. ☐Mr. ☐Mrs. ☐

(Fill in the capital letters)

*First Name *Last Name *Hospital / Institution *Designation *Postal Address *City *State *Pin *Country *Mobile *Email Accompanying Person 1 2 **REGISTRATION FEE:**

Please tick the appropriate box

Category	Early Bird Till 31 st March 2025			Regular Till 31 st July 2025			On Spot Registration		
	Amount	GST@18%	Total	Amount	GST@18%	Total	Amount	GST@18%	Total
Delegate	₹10,000	₹1,800	₹11,800 ☐	₹11,652	₹2,097	₹13,750 ☐	₹12,711	₹2,288	₹15,000 ☐
Embryologist	₹6,000	₹1,080	₹7,080 ☐	₹9,788	₹1,761	₹11,550 ☐	₹11,016	₹1,983	₹13,000 ☐
Accompanying Person	₹8,050	₹1,449	₹9,500 ☐	₹8,855	₹1,593	₹10,450 ☐	₹10,169	₹1,830	₹12,000 ☐
PG	₹6,000	₹1,080	₹7,080 ☐	₹5,932	₹1,067	₹7,000 ☐	₹6,779	₹1,220	₹8,000 ☐
Banquet	₹1,271	₹228	₹1,500 ☐	₹1,355	₹244	₹1,600 ☐	₹1,440	₹259	₹1,700 ☐

NOTE: Registration fee includes GST@18%**PAYMENT MODE:**

In favour of

Cheque / DD # Dated: Drawn on: Amount: In words: **BANK DETAILS:**

Account Name : Chapter of ISAR Andhra Pradesh

Account Number : 924010063784882

Bank Name : Axis Bank

Bank Address : Suryarao Pet, Vijayawada

IFSC Code : UTIB0000555

SCAN QR CODE TO
MAKE THE PAYMENT**Conference Secretariat****Dr. Padmalatha Yarasi**
Organizing Chairperson**Dr. S. Uma Shankar**
Organizing Secretary**Dr. Kavitha Chalasani**
Organizing SecretaryPadmaja Clinic Building, Door No. 32-2-9, Ratnamamaba Road,
Mogalrajuram, Vijayawada - 520010, Andhra Pradesh, India.

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Website: www.southisar2025.com

Dr. Padmaja Veeramachaneni
Organizing Chairperson**Dr. Sudha Padmasri**
Organizing Secretary**Dr. Pramoda Reddy Y**
Organizing Secretary**Professional Conference Organizer & Travel Manager****meety****Meety Events Private Limited**Office No. 207, HITEX 2nd Floor,
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