

4TH RESPIRATORY UPDATE (GOA)

DATES: 19TH – 21ST JULY 2024 | VENUE: GRAND HYATT, GOA

REGISTRATION FORM

Title: Dr. [] Prof. [] Mr. [] Mrs. [] Ms. [] Date _____

SRMV(BCG) Member – Yes [] No [] Medical Council Reg No. _____

Full Name _____ *(As required on certificate & badge)

Qualification _____ Date of birth ____/____/____ Age [] Gender - Male [] Female []

Address _____

City _____ State _____ Pin Code _____ Country _____

Email _____ Mobile No _____

ACCOMPANYING PERSON DETAILS

No. of Accompanying Person(s) _____

Full Name _____ *(As required on badge) Age [] Gender: M [] F []

Full Name _____ *(As required on badge) Age [] Gender: M [] F []

Full Name _____ *(As required on badge) Age [] Gender: M [] F []

REGISTRATION FEE SCHEDULE

Tick Preference	CATEGORY	Up to 31 st March 2024 (EARLY BIRD)			Up to 04 th July 2024		
		Fees	18% Gst	Total	Fees	18% Gst	Total
1. <input type="checkbox"/>	Non-Member Delegate	₹ 20,000	₹ 3,600	₹ 23,600	₹ 24,000	₹ 4,320	₹ 28,320
2. <input type="checkbox"/>	SRMV(BCG) Members	₹ 19,000	₹ 3,420	₹ 22,420	₹ 19,000	₹ 3,420	₹ 22,420
3. <input type="checkbox"/>	Postgraduate Student	₹ 18,000	₹ 3,240	₹ 21,240	₹ 18,000	₹ 3,240	₹ 21,240
4. <input type="checkbox"/>	Accompanying Person	₹ 19,000	₹ 3,420	₹ 22,420	₹ 21,000	₹ 3,780	₹ 24,780
5. <input type="checkbox"/>	Children 6-12 Years	₹ 5,000	₹ 900	₹ 5,900	₹ 5,000	₹ 900	₹ 5,900
6. <input type="checkbox"/>	Non-Residential Registration (Only For Goa Doctors)	₹ 15,000	₹ 2,700	₹ 17,700	₹ 16,000	₹ 2,880	₹ 18,880

Tick Preference	Workshop Names(Per workshop 25 max Registration)
1. <input type="checkbox"/>	Complex Pleural Effusion
2. <input type="checkbox"/>	Unrevealing Mysteries - MDD in Pulmonary Medicine
3. <input type="checkbox"/>	Fire and Ice in IP
4. <input type="checkbox"/>	Pulmonary - Critical Care Interface

Up to 04 th July 2024 (For Each Workshop)			
Upto 04th July 2024	Registration	18% Gst	Total
Workshop	₹ 1,500	₹ 270	₹ 1,770

Activity preference: 7 km Run [] Beach volleyball [] **TICK YOUR PREFERENCE**

PAYMENT DETAILS

Amount Paid for - Delegate ₹ _____ Acc. Delegate ₹ _____ Workshop Fee ₹ _____ Total Amount ₹ _____

Payment Mode: NEFT [] UPI [] Transaction ID _____ Transaction Dated _____

ACCOUNT DETAILS

A/C name : Society of Respiratory Medicine
Bank name : IndusInd
A/C No. : 100208707548
IFSC Code : INDB0000017
Branch : Vadodara

To proceed with payment via UPI, kindly utilize the provided UPI ID or scan the UPI QR Code using any UPI-enabled application on your mobile device, such as Gpay, Paytm, etc.

SOCIETY OF RESPIRATORY MEDICINE VADODARA

IndusInd Bank **SHIM UPI**

ACCEPTED HERE

UPI ID:

Pos.11291872@indus



Please note

- RTGS and UPI payments, we request you to complete the provided form and Email it, along with the payment acknowledgment printout, to the below Email Id reg.bcggoa2024@gmail.com.
- Payments made directly without the submission of the form on email will not be considered.

General Registration Guidelines:

- All rates mentioned are in INR and are inclusive of GST as per the Government of India regulations.
- The registration fee will be determined based on the date of payment receipt. A confirmation email, including your unique Registration ID, will be sent to all registered delegates. Kindly present this confirmation at the registration counter upon your arrival. Conference registration is mandatory for participation in workshops.
- The Residential Registration includes conference attendance. Accommodation is provided for 2 nights on a twin-sharing basis, except for Postgraduate students (PGs) who will be on a triple-sharing basis. All meals are inclusive, covering 2 breakfasts, 2 lunches, and 2 dinners, including a banquet.
- Accompanying persons will receive the same privileges as the main delegate, excluding attendance at scientific sessions and conference kits if any.
- **Airport/railway/bus station transfers are not included. Delegates are responsible for making their own arrangements or may contact our help desk for negotiated rates.**
- **PG students should include valid ID cards or certificates from their institution's HOD, duly signed and stamped.**
- Exclusive for Goa Doctors, the Day Delegate package includes all privileges except accommodation.
- Special rates have been negotiated for 2 days before and after the conference. Contact the hotel directly and quote "BCG Goa 2024" to avail of these rates.
- **Conference registration is mandatory for participation in workshop**
- All payment options are online, including UPI, NEFT, RTGS, Credit, and Debit Cards. No cash/cheques are accepted, and there is no spot registration.
- All delegates will be housed in the same venue - Grand Hyatt. The organizing committee strongly discourages staying elsewhere, and registration fees will remain unchanged if this is disregarded.
- Children below 6 years old are complimentary but their registration is mandatory. Special rates are extended for children between 6 - 12 years old. Children above the age of 12 years will be considered accompanying delegates and will be accommodated in the same room as their parents.
- The committee may assign a delegate to share your room on a twin-sharing & triple-sharing basis. Alternatively, if you prefer to room with a specific delegate, kindly email the requested details to reg.bcggoa2024@gmail.com, including the Registration ID, name, email, and phone number of the desired delegate.
- For postgraduate students, if you want to present a poster please select: Yes [] No []

Cancellation Policy

Cancellation of your BCG GOA 2024 registration can be done by writing an email to the conference secretariat at **Email Id: reg.bcggoa2024@gmail.com** clearly stating your registration number in the subject line. The email will have to be sent from the email address you used while registering.

- Cancellations made before May 31, 2024, will result in a deduction of 25%, along with applicable GST and any transaction charges.
- Cancellations done post June 01, 2024: No Refund
- All refunds will be provided post 6 weeks of the completion of the conference
- Time stamp of email will be considered as official date of cancellation request

Please note:

- Should you have any inquiries or encounter any difficulties during the registration process, please do not hesitate to reach out to the below mentioned details **Contact Details:- Ahmed Ali - +91 9619434720 | Email Id: reg.bcggoa2024@gmail.com**