



# ACCOMMODATION/TOUR BOOKING FORM



## 77<sup>th</sup> Annual National Conference of The Association of Surgeons of India **ASICON 2017 JAIPUR**

26<sup>th</sup> – 30<sup>th</sup> December, 2017 | B M Birla Auditorium, Jaipur



### DELEGATE DETAILS

Dr./Mr./Mrs. .... First Name ..... Middle Name ..... Last Name .....

Address: .....

..... City: ..... Pin: .....

State: ..... County: .....

Tel. City Code: ..... Residence: ..... Office/Hospital: .....

Fax: ..... Mobile: ..... Email: .....

### HOTEL CATEGORY

Name of the Hotel 1. .... 2. .... 3. ....  
(Kindly list in order of preference)

Check-in (date): ..... Check-out (date): .....

No of Nights:

Occupancy:  Single  Double

Mode of Arrival:  Airways  Railways  Roadways

Arriving from: ..... Date: ..... Time: .....

Pre/Post Conference Tour:  I  II  III  IV  V  VI  VII  VIII

Date you would like to start your tour: .....

Amount Paid: Rs. .... Mode of Payment: Cash/DD/Cheque/NEFT (Tick appropriate as applicable)

DD/Cheque/Bank Transfer Transaction No.: ..... Drawn on.....

in favour of 'Classic Rovers', payable at Jaipur.

(Signature)

**Please submit the duly filled form to Conference Secretariat:**

**Dr. Bhanwar Lal Yadav** (Organising Secretary)  
166A, Nirman Nagar-E, Behind Hotel Siddharth Residency,  
Ajmer Road, Jaipur-302019 (Rajasthan) INDIA  
Direct Line # +91-141- 3290 960, Office # +91-141-4035 163  
**Email:** hotelsasicon2017@gmail.com, tours.asicon2017@gmail.com

**OFFICIAL TRAVEL AGENT**



**Anand Sharma**  
Mobile # +91 93143 10006  
**Prateek Mathur**  
Mobile # +91 93094 10005

For Office Use Only      Receipt No.: .....      Registration No.: .....