



# 4<sup>th</sup> National Conference of Indian Society for Histocompatibility and Immunogenetics (ISHI)

2<sup>nd</sup> – 3<sup>rd</sup> December, 2016



1. Name (Prof./Dr./Ms./Mr.) \_\_\_\_\_
  2. Category of Registration\_\_Student [  ] Member [  ] Non-Member [  ] Industry [  ]
  3. Membership No.....
  4. Designation\_\_\_\_\_
  5. Organization/Institute/College\_\_\_\_\_
  6. Postal Address\_\_\_\_\_
- E-Mail ID\_\_\_\_\_
- Tel./Mob. Nos.\_\_\_\_\_

## Registration Details

- Conference [  ]
- Pre Conference Workshop (1<sup>st</sup> December, 2016) [  ]
- Next generation sequencing [  ] OR Automated PCR - SSP [  ]
- Luminex [  ] OR Flow cytometry [  ]

## Mode of Payment DD/Cash/Online Transfer

Account Number 35782033322 of ISHICON-2016, IFSC Code sbin0001524,  
SWIFT Code – SBININBB443, MICR Code – 160002007  
State Bank of India, Medical Institute Branch, Sector – 12, Chandigarh, India

By DD No. \_\_\_\_\_ Dated \_\_\_\_\_ Amount \_\_\_\_\_  
Cash Rs. \_\_\_\_\_

Amount should be remitted through DD drawn in favour of “ISHICON-2016” payable at Chandigarh.

Dated:

Signature

## Organizing Secretary

Department of Immunopathology, Room - 19, IV Floor, Research Block A, SS Anand Block, PGIMER,  
Sector 12, Chandigarh-160012, Phone : 0172-2755191,

Email: [ishichandigarh2016@gmail.com](mailto:ishichandigarh2016@gmail.com) | Website: <http://www.ishi2016chandigarh.com>