



32th Annual Conference of Association of Physicians of India, West Bengal Branch

19th, 20th & 21st Sept, 2025

Hotel ITC Royal Bengal, Kolkata

REGISTRATION FORM

Name (in BLOCK): _____

Institute _____

Mobile: _____ Email : _____

Delegate : ☐ PGT : ☐ AMOUNT : _____

Mode of payment UPI / NEFT / Cash /CHEQUE No: _____ Date : _____

Bank Name : _____

Registration Fees (Including GST 18%)		
Category	Upto 31.08.2025	Spot Registration
Delegate	Rs. 3,000/-	Rs.4,000/-
PGT	Rs.1,500 /-	Rs.2,000/-
Corporate	Rs. 5,000/-	Rs. 6,000/-

Scan and pay the
Registration fee

Please pay in favour of -

Account Name : EZAPICON 2025

Bank - Axis Bank, Central Avenue Branch

Account Number - 925010033131325

IFSC code - UTIB0000870

GSTN : 19AAABA0425B1ZI

After payment (UPI / NEFT) send the screen shot with the filled up form to ezapicon2025@gmail.com

PG students need to submit the confirmation certificate duly signed by their HOD

SIGNATURE : _____