



NEUROSONOLOGY 2024

Date: 18th Feb 2024, Time: 9am to 5pm

Venue: Chengalpattu Medical College Hospital



REGISTRATION FORM (PLEASE FILL IN CAPITALS)

Title Initial Name

Medical Council State and Number

Consultant

Resident – 1st year/ 2nd year/ 3rd year

Name of the Institution

Address for Communication

.....

.....

City Pin code

State Mobile

WhatsApp no:

Email ID

	Fees
Consultant	1000
Resident	500

For online registration & payment please visit: <https://tan.org.in/#>

Registration restricted to 1st 80 Delegates.