




**Cancer Patients Aid Association**  
**Total Management of Cancer**  
**www.cancer.org.in**

**REGISTRATION FORM for DAY 1**

**“Frontiers in Carcinogenesis and Cancer Prevention: Scientific Endeavors and Public Health Initiatives” hosted by Carcinogenesis Foundation, USA in association with Reliance Life sciences**

<p><u>Personal Information</u></p> <p>Full Name: (Block Letters): _____</p> <p>Postal Address: _____ _____</p> <p>City : _____ Post Code: _____</p> <p>Telephone No.: _____ Fax No.: _____</p> <p>Email: _____</p> <p>Preferred name on name tag: _____</p> <p>Occupation: _____</p> <p>Organization/Company name: _____</p> <p>Date of birth (dd/mm/year): _____</p> <p>Registration fee is 300 INR for students and 500 INR for all others*</p> <p><u>Form of Payment:</u> Cash Cheque/ DD in favour of Cancer Patients Aid Association Name of Bank _____ Cheque Number _____ Cheque Date _____</p> <p>Signature _____ Date _____</p>	<p>Date: 5 Feb, 2010 Time: 10 am Venue: <b>Reliance Life Sciences</b>, R282, TTC Area of MIDC, Thane-Belapur Road, Rabale, Navi Mumbai - 400 701.</p> <p>Please send completed form and registration fee to: <b>Cancer Patient Aids Association</b>, King George V Memorial, Dr E Moses Road, Mahalaxmi, Mumbai 400011 Tel: 0222 491 3856 Fax: 0222 497 3599</p> <p>For Further details please contact: <a href="mailto:shital.raval@cancer.org.in">shital.raval@cancer.org.in</a></p> 
<p>* Acknowledgment of registration will be sent by email</p> <p>** Last date of registration is 10<sup>th</sup> Jan, 2010.</p> <p>***This form is registration for day 1 only and not for the entire conference.</p>	