

*Digital Cardio Diabetes - Reaching the Unreached*

## SPONSORSHIP & EXHIBITION

### BOOKING FORM

Name of the Company: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Pin Code: \_\_\_\_\_

Relationship Manager: \_\_\_\_\_ Designation: \_\_\_\_\_

Mobile No: Country Code: \_\_\_\_\_ Number: \_\_\_\_\_ Fixed Line: \_\_\_\_\_

E-mail: \_\_\_\_\_

Preferred Display Name: \_\_\_\_\_

### Sponsorship Preference

Please mentioned the type of participation in which you are interested (as per the options provided by us in the prospectus)

PLATINUM /  DIAMOND /  GOLD /  SCIENTIFIC PARTNER /  STANDARD EXHIBITOR

Others: \_\_\_\_\_

### Payment Details

Total participation amount: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Electronic Transfer no.: \_\_\_\_\_ Date: \_\_\_\_\_

Bank: \_\_\_\_\_ Balance payable by: \_\_\_\_\_

### Bank Details

A/c Name : MCI GETS INDIA PVT LTD GCDC 2020

IFSC Code : HDFC0000572

Account No : 50200052884320

Branch : Sector 53 Gurgaon

Please share payment details post the transaction and feel free to communicate with event secretariat.

I agree with all terms & condition as mention in the industry prospectus:  [Tick the box]

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

### *Conference Secretariat*



**Dr Nihar Mehta**  
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### *Conference Manager*



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