



Predictability and Perfection
in Implantology

13th - 15th September, 2019
Le Méridien - Hotel, New Delhi

TRADE EXHIBITION FORM

Company Name: _____

Address: _____

City: _____ State: _____

Postcode: _____ Country: _____

Contact Person Details

First Name: _____ Middle Name: _____

Last Name: _____

Work Phone: _____ Mobile Phone: _____

Email Id: _____

METHOD OF PAYMENT :

DD/CHEQUE/CASH/NEFT (for Delhi only) or drafts payable at New Delhi in favour of **"Academy of Oral Implantology"**

Draft/Cheque No. _____ Date _____

Bank _____ City _____

PAYMENT MODE :

DD/CHEQUE/CASH/NEFT in favour of **Academy of Oral Implantology**

BANK DETAILS :

Bank Name: Syndicate Bank

Branch: Maulana Azad Medical College, New Delhi-110002, India

Bank Account: 90682210006030

Swift Code: SYNBINBB126

IFSC Code: SYNB0009068

PAN: AADTA4436B

Dr. Ajay Sharma | Conference Secretary

11th International Congress of Academy of Oral Implantology

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