

International Symposium on Medical Astrology - 2018 ISMA-2017 -(JYOTHIRVAIDYAM) Date: 17th & 18th February 2018

Venue: Astroved.com Private Limited

SP-75, 12th Street, Ambattur Industrial Estate, Ambattur, Chennai-600058, India Tel: 044-43419898, Mobile: 9677391108/9677391109 Email: isma@astroved.com

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CONFERENCE REGISTRATION FORM

(Please complete and return by email or regular Mail)

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Guidelines on Submission of Abstract

- Abstract should be in English only
- All material must be the work of authors listed and appropriately referenced. The submitting author must provide Conflict of Interest Disclosure information and must read and agree to the ISMA Abstract License and Publishing Agreement for ALL authors.
- All abstracts will be printed and published as they appear in the Preview Step.
- The ISMA is not responsible for and will not copyedit abstract submissions. Please ensure all special characters and formatting display correctly and your author block only appears once.
- The abstract should be well written in terms of language, grammar, etc.
- The abstract title should describe the subject being written about.
- The abstract should make a clear statement of the topic of the paper and the research question.
- The abstract should say how the research was/is being undertaken
- The abstract indicates the value of the findings and to whom will they be of use.
- The abstract describes the work to be discussed in the paper. The abstract should give a concise summary of the findings. The abstract conforms to the word limit of 300 words.
- The abstract should have between 5 and 10 keywords or phrases that closely reflect the content of the paper.

Note: The abstract submission fees are non-refundable

Final Paper should not exceed 3000 words (5 to 7 Pages) along with Power Point Presentation (10 to 12 Slides) for completing the presentation within 15 to 20 minutes per paper.

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Abstract (Max 300 words)





Registration Fees:

Timelines	Delegate	Paper Presenting	NRI / Foreign
		Professionals	Nationals
Before 15 December 2017	INR 750	INR 1500	US \$ 100
Before 31 December 2017	INR 900	INR 1700	US \$ 110
After 31 December 2017	INR 1000	INR 2000	US \$ 130

- Registration fee includes Conference bag, Lunch and Tea Snacks. Conference bag is not guaranteed for Spot Admissions.
- Fee does not cover the cost towards accommodation, other meals, Pickups and Airport Transfer.
- Registration for Conference Dinner by Paying INR 500.

Please include a copy of your Valid Student Card / Other Formal Identification.

Mode of Payment

- (a) Registration can be made by Demand Draft of any Nationalised Bank in favour of "Astroved.com Private Limited"
- (b) The demand Draft should be attached to the fully completed Registration Form and sent by post to the address mentioned in the Registration Form

Or

Delegates / Participants can directly deposit fee through Electronic Transfer to the under mentioned account

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Bank: HDFC Bank, Anna Nagar Branch, Chennai.-600040

NOTE: Do not forget to mention the electronic transfer details on the registration form and email the completed form to isma@astroved.com

Dietary Requirements o All snacks and Lunch will be of pure vegetarian

 Any Special Dietary requirement(For Health reasons) can be mentioned in the Registration Form



Additional Instructions:

Important dates:

Date	Day	Activity
15 Dec 2017	Friday	Opening of Abstract Submission
15 Dec 2017	Friday	Opening of Conference Registration
10 Jan 2018	Wednesday	Closing of Abstract Submission
15 Jan 2018	Monday	Close of Early Bird registration for Paper Presenters and Attendees
31 Jan 2018	Wednesday	Full Paper submission by presenters
10 Feb 2018	Saturday	Close of Registration through mail / Website Paper Presenters and Attendees
17 & 18 Feb 2018	Saturday & Sunday	Conference Dates

If you have problem in registering – please contact Mr.Vinoth Kumar (E-mail: vinothkumar@astroved.com)

Payment Information: Registration Forms must be accompanied by full payment in order to be processed

Confirmation: Please allow 3 days for emailed confirmation of your registration

By sending in the registration form, I acknowledge that I commit myself for the immediate payment of the full conference fee. I have taken Notice of the Cancellation terms on this Form.

Date: _	_ / / 2017	Signature:	_

Organizing Secretary

Mr.Vinothkumar

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