



5th Annual Conference Of

PAK ASSOCIATION FOR DENTAL RESEARCH (IADR PAKISTAN SECTION)

12th -14th October 2018

LAHORE PAKISTAN

VENUE: INSTITUTE OF DENTISTRY CMH LAHORE MEDICAL COLLEGE, CANTT LAHORE.

Name		Designation:	
Affiliation (Institution Name for students)			
Address:			
Tel (Mobile):		E-mail:	
PMDC number:		PADR (IADR) Membership Number	
Please tick (for students only)			
Under graduate		Post graduate	
Name & Sign of Principal / Dean / HOD (for students only)			

*Required information

Attending as (please tick box):

Local Participant

Student

International participant

International Student

Are you a presenter (Please tick box): YES NO

If yes:

Oral presentation

Poster presentation

Title of Abstract:

All presenters must register before

Conference registration fee (please tick the appropriate):

Participants	Before 31 st Aug 2018	After 31 st Aug2018	On spot
<input type="checkbox"/> PADR members	<input type="checkbox"/> Rs 1,500/-	<input type="checkbox"/> Rs 2,500/-	<input type="checkbox"/> Rs 3,500/-
<input type="checkbox"/> Non PADR members (Dentist / Faculty)	<input type="checkbox"/> Rs 4,000/-	<input type="checkbox"/> Rs 5,000/-	<input type="checkbox"/> Rs 6,000/-
<input type="checkbox"/> Students (Undergraduates)	<input type="checkbox"/> Rs 2,500/-	<input type="checkbox"/> Rs 3,500/-	<input type="checkbox"/> Rs 4,500/-
<input type="checkbox"/> Students (Postgraduates)	<input type="checkbox"/> Rs 3,500/-	<input type="checkbox"/> Rs 4,500/-	<input type="checkbox"/> Rs 5,500/-
<input type="checkbox"/> Foreign Participants	<input type="checkbox"/> \$ 300	<input type="checkbox"/> \$ 400	<input type="checkbox"/> \$ 500

- For workshop registration, please contact the organizing committee
- This form must return to the conference secretariat to ensure your participation in the program
- Please bring your original receipt on the conference day

Registration fee can be paid by pay-order/ Cheque / online to :

Account name: Pak Association for Dental Research

Account #: 23057901924503

Bank: Habib Bank Ltd.

Branch: COMSATS Raiwind Road Lahore

Branch code: 2305

Kindly send scanned copy of registration form and receipt of payment to :

Dr Asim Riaz

Registration committee

Assistant Professor Orthodontics, FMH College of Dentistry

Tel: 0321 4305057, E-mail: [.registration@padr.com.pk](mailto:registration@padr.com.pk)

Signature:

Date: