

## **REGISTRATION FORM**

6<sup>th</sup> International Conference of World Council for Psychotherapy (Asian Chapter) & 5<sup>th</sup> International Conference Of Yoga and Psychotherapy Association of India (YPAI)

## Science of Consciousness, Psychotherapy and Yoga Praxis : Ancient and Modern Perspectives

24.09.2012 - 26.09.2012 DELHI-INDIA

NAME:				MALE	/FEMALE	AGE:	
PHOTO IDENTITY /PASSPORT NUMBER: (Please attach Copy, Foreign Participant must attach copy of Passport/Visa)							
PROFESSION / JOB:							
ADDRESS:							
PHONE:	FAX:			EMAIL:			
DELEGATE/	SPEAKER/	KEY-NOTE SPEAKER	/	ACCOMPANY	PERSON		
ARRIVAL (With Date, Time and Mode) :							
DEPARTURE (With Date, Time and Mode) :							
ACCOMODATION: Required -Type				/	Not Requ	uired / Self:	
Payments:	Conference Registration Fee: Accommodation: Total:			Pre Confere Tour:	Pre Conference Workshop Fee: Tour:		

Signature

## PLEASE FILL THIS FORM AND SEND IT TO:

DR.GANESH SHANKAR, DIRECTOR of the Conference BDS-1,SAGAR UNIVERSITY,  $\underline{\text{SAGAR-470003 (M.P.)INDIA}}$ 

Phone:0091 7582 265539 Mob.:09425656196

Web Site: www.worldpsyche.org OR www.asianpsyche.org

Email: int.conf.india@gmail.com or prof.ganeshshankar@yahoo.in

Bank and Account Details for Payments:

Account Name: International Conference on Yoga and Psychotherapy

Account Number: 31953687191

Bank: State Bank of India (Saugor University Branch, Sagar –MP-India)

Bank Code: 1143

IFSC Code: SBIN0001143 (used for RTGS and NEFT transactions)

MICR Code: 470002303

Important:

All payments should be sent at the earliest so that your participation/accommodation may be confirmed to avoid any inconvenience at the last stage. Payments are accepted by the pay order/demand draft / Multi City Cheques / bank transfer