

# NEMICON 2024

1st National Emergency Medicine & Intensive Care Conference 2024

# "FROM CRISIS TO CARE: TRENDS AND TRANSFORMATION"

#### **Dr Haider Abbas**

Prof. & Head Emergency Medicine KGMU

Organizing Chairperson

#### Venue

Department of Emergency
Medicine King George's Medical
University Lucknow







nemicon2024@gmail.com

#### **REGISTRATION FOR NEMICON 2024**

Category	Early Bird Till 31st July	Late Riser Till 15th September	16TH September Onwards & On Spot Registration
Delegates (Conference)	INR 3000	INR 4000	INR 5000
Delegates (Conference + Workshop*)	INR 3000 + INR 1000	INR 4000 + INR 1000	INR 5000 + INR 1000
	Conference+Workshop*	Conference+Workshop*	Conference+Workshop*
PG Medical Students	INR 2000 + INR 500	INR 2500 + INR 500	INR 3000 + INR 1000
UG Medical Students	INR 1000 + INR 500	INR 1500 + INR 500	INR 1500 + INR 1000
Nursing	INR 600 + INR 500	INR 1000 + INR 500	INR 1000 + INR 500
Paramedics	INR 500 + INR 500	INR 1000 + INR 500	INR 1000 + INR 500
Accompanying Person (Per Person)	INR 1500	INR 2000	INR 3000

<sup>\*</sup>For Workshop, Conference registration is mandatory

<sup>\*</sup>One can register for only one workshop



#### **BANK DETAILS**

#### **Online Payment Mode**

Account Name: NEMICON 2024 Department of Emergency Medicine

Trauma Centre KGMU Lucknow 226003

Bank Name: INDIAN BANK Account No: 7811133632 IFSC Code: IDIB000K656

Branch Name: INDIAN BANK K G Medical College, Lucknow

# NEMICON 2024 SCAN & PAY

#### **Offline Payment Mode**

Cheque (please write your name & Mobile Number) in favor of "NEMICON 2024" payable at LUCKNOW

After NEFT please send mail at **nemicon2024@gmail.com** with screenshot of NEFT detail & Registration Form

Please send the duly filled registration form along with DD/Cheque to conference secretariat Address.

Registration Link: <a href="https://forms.gle/4XLWepbAdxa7AVGx5">https://forms.gle/4XLWepbAdxa7AVGx5</a>

## Registration Form

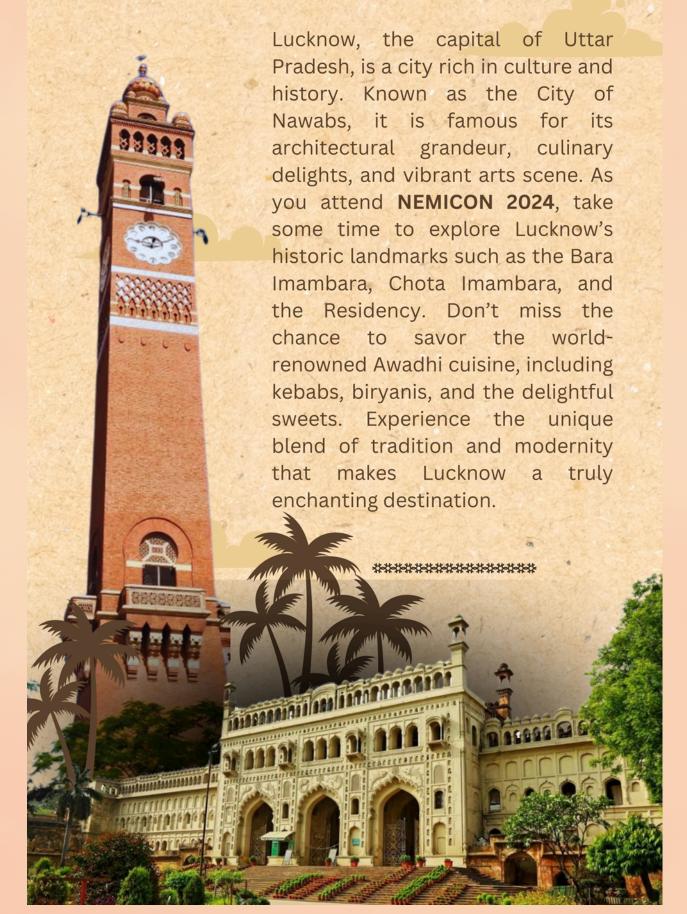
Name:			
Age:	Gender:		
Address for Communication:			
City:	State:		
Country:	Zip / Postal Code:		
Mobile No:	Email:		
Designation:			
Institution:			
No. of Accompanying Persons:			
Accompanying Person Name1:			
Accompanying Person Name2:			
PAYMENT DETAILS:			
UPI / NEFT / RTGS/Cheque / DD /:_			
Date:			
Amount:			
Signature:			

#### **PLEASE NOTE:**

- 1) DD should be in favour of "NEMICON 2024" payable at Lucknow, India.
- 2) We will consider the date of receipt of UPI / NEFT / RTGS/Cheque / DD while processing the registration as per above deadlines.



**The City of Nawabs** 



### Confernece Highlights









#### **CONFERENCE SECRETARIAT**

**Department of Emergency Medicine**King George's Medical University
Lucknow - 226003

Contact: +91 6394113182, +91 816854 1276, +91 8005141555 Email: nemicon2024@gmail.com