**Event Bided for:** 

# INDIAN ACADEMY OF ORAL MEDICINE AND RADIOLOGY

Annual Conference / PG convention / OOO Symposium

## **Application to Host National Events**

Proposed Year:
Proposed City:
Application Date:
1. The Applicant:
A. Name of Applicants:
B. Current address & Contact details of Applicants:
C. Designation of Applicants(If Faculty):
D. How many National conferences the above applicants have attended in last five years?
(Kindly attach the copy of certificate of attendance).

#### 2. Proposed conference city/centre:

- A. Name of the conference centre:
- B. Number of Halls available for the conference with the capacity, type of hall, distance between these halls.
- C. Distance between conference venue and hotels /accommodation .
- D. Transport facility available from hotels/accommodation area to conference venue.
- E. Number of hotels near the conference venue available for delegates. (Kindly give name of hotels and approximate tariffs)
- F. The transport mode available for the city where the conference is hosted.(Mention nearest airport, railway and bus station)
- G. Distance from nearest Airport to the conference venue.

#### 3. The Organizing team:

- A. Number of conference, workshops, CDEs of OMRD conducted by the organizing team in last five years(Furnish detail)
- B. Where the members of organizing team part of any other conference held in your city (IDA etc)? Furnish details.
- 4. Proposed registration Fees in case conference is allotted.
- 5. Any other special mention bidder has to make.

Sl. No	Name of the Life member with	Designation	Local Address	Signature
	LM number			

The hard copy can be submitted physically to HGS prior to the 3<sup>rd</sup> EC

during the National Conference.

6. Name of member & Email Id of bidder where allotment confirmation to be sent.

### For office use only

Application received on	
Verified by HGS	
Sign of Hon Secretary	Date: