

REGISTRATION FORM

| First Name: | | Surnam | e: | Gender M/F: |
|-------------------------|------------------|--------|-------------------------|-------------|
| MMC/ Other Council No.: | | | Hospital / Institution: | |
| Qualification: | | | Speciality: | |
| Address For Communic | ation: | | | |
| City: F | incode: | Stat | e/Country: | |
| Mobile No/Contact No (\ | vith Area Code): | | Email: | |

PAYMENT DETAILS:

REGISTRATION FEE (FEE/PERSON in INR and USD) + 18% GST

| Category | Upto 1 st January 2026 | Upto 13 th March 2026 | Spot |
|------------------------|-----------------------------------|----------------------------------|------------|
| National Delegate | INR 15,000 | INR 16,000 | INR 17,000 |
| PG Student * | INR 10,000 | INR 11,000 | INR 12,000 |
| HCPs # | INR 15,000 | INR 16,000 | INR 17,000 |
| Accompanying person | INR 15,000 | INR 16,000 | INR 16,500 |
| International Delegate | USD 550 | USD 600 | USD 650 |

^{*}Includes PHFI / CDI course participants

#Health Care Providers Non MBBS / Para Medics / Researchers

Note: Final decision on all aspects of registration will be taken by Organizing Committee. The maximum delegate number will be limited to 1800. So please register early.

MODE OF PAYMENT:

NEFT

Name of the account: "International Diabetes Summit" Branch: Pashan Road, Pune Account No: 051620110000420 Bank Name: Bank of India

IFSC: BKID0000516 Type of account: Current

Cancellation Policy: For all requests of registration cancellation received before 20th Feb 2026, 75% of the registration amount

will be refunded one month after the conference. No cancellation requests will be accepted thereafter.

Kindly Note: As per MMC Guidelines no Certificates will be issued to Delegates & Faculty who have attended the conference

but not signed the MMC attendance sheet

The Secretariat Address:

10th International Diabetes Summit 2026

Chellaram Diabetes Institute

1st Floor, Lalani Quantum, Opp. Calsoft, Pune Bangalore NH4 Baydhan (Budruk),

Pune - 411021

Contact: Ms. Shraddha U. Mahajan

020-66839771 | +91 77450 15553

E-mail: ids@cdi.org.in

For Registration Contact Vama Events Pvt. Ltd.

Kohinoor Square Phase I, B Wing, Office No. 1004,

N. C. Kelkar Road, Shivaji Park, Dadar West, Mumbai - 400028

Tel.: + 022 35131930/31/32/33, 022 46052832

Email: conferences@vamaevents.com



For Online registration

www.cdidiabetessummit.org | www.cdi.org.in