**PERSONAL DETAILS**

First Name: Last Name:

Age: Gender:  Male  Female

 *(tick / underline / highlight)*

Home Address: Office Address:

Email: Telephone:

Fax: Mobile:

**Note:** Please tick / underline / highlight the contact address for all communication.

Home Office/Organization.

**PROFESSIONAL DETAILS**

Profession: Educational Qualification:

Specialization: Professional Experience: years

Years of Experience in Waldorf/Anthroposophy:

Do tick / highlight the following Anthroposophical terms you familiar with

3 fold human being 4 sheaths

7 life processesTwelve senses

SeptennialsEurythmy

**Have you attended any other conference / training related to Anthroposophy? If yes, then please specify: (for eg. Ipmt 2 times, khandala week 1 &2 , 2 times ….)**

**REGISTRATION CATEGORY**

**Indian Participants *(tick / underline / highlight)***

 Doctors Psychotherapists Teachers (Kindergarten / Grade)

 Therapists (Physiotherapy/Occupational/ Curative Education and Social Therapy

 Speech Therapy) (Special Educators)

 Community Development General Anthroposophy

**Foreign Participants *(tick / underline / highlight)***

 Doctor Others (Please mention your area of work and registration category)

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**PAYMENT DETAILS *(tick / underline / highlight)***

Cheque / Demand Draft/ Wire transfer

Cheque no. / DD no / Wire transfer reference no./ Name of the Bank, Branch: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**SELECT CATEGORY AND REGISTRATION TARIFF**

|  |  |  |
| --- | --- | --- |
| **Registration of Categories** | **Indian Participants** | **Foreign Participants** |
|  Teachers  Curative Educators  General Anthroposophy  Community Development Doctors, Therapists, Counselors, Psychologists | Rs. 12,000/-Rs. 12,000/-Rs. 15,000/-Rs. 15,000/-Rs. 15,000/- | 325 $US325 $ US400 $ US400 $ US400 $ US |

* Registration Fee for IPMT includes training sessions as per schedule, 3 meals and 2 teas/day and accommodation for 7 days & 7 nights. If anyone wishes to extend or advance their stay, additional charges and bookings have to be personally borne by the participant.
* Accommodation for the delegates is available ONLY from 3 pm on Wednesday, 23rd November 2016, and will be available till 3.00 pm of 30th November, 2016. For anyone who wishes to come in the morning of 23rd November, the rooms will be available at the cost to be borne by the delegate.
* All the participants will have to arrange their own transportation to & from railway station / airport to the venue. The nearest airport is Mumbai Airport.
* Please visit the venue website <rmponweb.org> for other details for travel.
* Registrations after 15th Nov 2016 would depend on the discretion of the AMS executive.
* **Payment should be made with attached/online submission of registration form and covering letter** in case of
* D.D / Cheque / Banker’s Cheque favouring ‘**The Anthroposophic Medical Society-India Chapter**’, payable at Mumbai, India
* Postal address along with the registration form / covering letter to **Preeti Misra, Progressive Sea Lounge, A Wing Flat no 101, Sector 15, Belapur, Navi Mumbai, 400614**. (09819984795)
* Registration forms to be sent by email to swapnanarendra63@yahoo.com or contact.ipmtindia@gmail.com
* Registration fee can also be sent by a Swift Wire transfer of funds (In US$)
* For outstation cheques please add Rs. 50/- for collection charges.
* **Things that participants need to carry**: Colour pencils/crayons, torch, mosquito repellent, water bottle. Towels and bedding, with bedcover will be provided. Swimming costumes can be brought if desired, as there is a small pool at the venue.
* **SMOKING AND DRINKING ARE STRICTLY PROHIBITED AT THE VENUE.**

|  |  |
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| Payment information for overseas delegates | Bank of America, NA, New York, NY, US |
| SWIFT CODE – FED ABA 026009593 BOFAUS3N |
| For Credit to | Central Bank Of India, Overseas Branch, Mumbai,A/c No. 6550991916SWIFT CODE – CBININBBOSB |
| For further Credit to | Central Bank of India, Millers road branch Bangalore CBININBBMRB |
| Ultimate Beneficiary for overseas delegates/ Account details for Indian delegates | Current A/C No. 3481729748Central Bank of India, Indira Nagar Branch, Bangalore, 560038Name: The Anthroposophic Medical Society-IndiaChapter**429, Varthur Road, Nagavarapalya, Bangalore– 560093** |
| Indian Rupees transfer of other Banks | IFSC Code - CBIN0281425 |

**PAYMENT AND REFUND POLICY**

* Payment policy
* Registration Charges up to 7th Nov 2016: Same as actual Tariff.
* Registrations from 8thNov 2016 onwards: **Actual Tariff + Late fees Rs. 1000/-**
* For Foreign participants registration charges from 7thNovember 2015 onwards:
* **Actual Tariff+ late fees $ 30**
* Refund policy on cancellation of participation

Before 2nd Nov 80% refund
Before 12th Nov 50% refund
Before 19th Nov 20% refund
After 20th Nov cancellation no refund

**ACCOMMODATION**

* Teachers and Curative Educators – Triple sharing Non Ac Rooms.
* Others – Twin sharing Non Ac Rooms
* If anyone needs Ac Rooms same can be availed at Rs 20000 on triple sharing basis only.
* Delegates are expected to identify two roommates in case of up-gradation request.
* Ac rooms will be available depending on availability only.

**CONTACT PERSONS**

For registration and payments :

PreetiMisra 9819984795

For Submitting forms and all other information:

Suchitra Inamdar :9820454501