

GANGA BISHAN MEMORIAL HOSPITAL

To Whomsoever

C 49A, MAHENDRU ENCLAVE
(NEAR HANS CINEMA)
G T KARNAL ROAD,
DELHI-110 033

DIRECTOR
DR. C M ARORA
M.B.B.S., D.C.H.

Subject: Acceptance of invitation for Medifest

Dear Sir,

We wish to participate at Medifest, premier medical & healthcare trade event, scheduled as on December 5-7, 2008 at Pragati Maidan, New Delhi and accept the invitation as "Special Invitee" at the event. We shall be very pleased to join the session.

I along with my institutional members aspire to be at Medifest along with its concurrent happening conferences. Please do issue us the pre-registered delegate passes for our visit.

Wish you all the best for the event!

Sincerely,

Arora
Ph. 7127107
Bishan Memorial Hospital
C-49A, Mahendru Enclave,
G.T. Karnal Road, DELHI-110 033

Title..... Full Name..... *Dr. Chandan Mohan Arora*
Designation..... *J/c Ganga Bishan Mem. Hospital.*
Institution..... *as above*
Contact Details..... *C-49A, Mahendru Enclave*
G.T. Karnal Rd Delhi 33-
Phone No. (1)..... *27127107* (2)..... *27418888* (3).....
Fax..... Mobile..... *981081638*
E-Mail..... Web.....
No. of Beds in institution..... *6*
Any future expansion plans.....
Any in-house pharmacy in hospital..... *no*
If yes, tick mark the relevant option : Private Hospital Owned

To serve you better, kindly handover this filled form either by mail/fax/post or by hand at
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