



Dr. Gurbinder Singh
B. D. S. FAGE MDA
Consultant Dental Surgeon

K. H. DENTAL CLINIC

Clinic :
K-105, Kirti Nagar,
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Timings: Mon 9:30 am - 1 pm
Eve 5:30 pm - 8:30 pm

Residence :
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Whosoever It May Concern

for Medifest

Dr. Gurbinder Singh

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,

Gurbinder Singh

Sign & Stamp
Gurbinder Singh
B.D.S. FAGE M.D.A.
Consultant Surgeon

Title..... Dr..... Full Name..... GURBINDER SINGH.....

Designation..... DENTIST.....

Institution..... K.H. DENTAL CLINIC.....

Contact Details..... K-105, KIRTI NAGAR, NEW DELHI-15.....

Phone No. (1)..... (2)..... (3).....

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No. of Beds in institution

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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