

Ph. 27042287

Kaladeep Dental

-a Center for Prosthodontics



D-14/19, Near Ayodhya Chowk

To Whomsoever

Subject: Acceptance of invitation for Medifest

Dear Sir,

We wish to participate at Medifest, pr as on December 5-7, 2008 at Pragati Maidan, "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,
DR. MRS. KIRTI GOEL
B.D.S., M.D.S.

D-14/19, Sector-3, Rohini, Delhi-85
Recd No. A-4847

Sign & Stamp

Ref.

Dr. Sumit Goel
B.D.S., M.D.S. (DWD)
Consultant Prosthodontist

Title..... Full Name SUMIT GOEL

Designation..... DIRECTOR

Institution..... KALADEEP DENTAL & IMPLANT CLINIC

Contact Details..... D-14/19, NEAR AYODHYA CHOWK
SEC-3, ROHINI - 85

Phone No. (1) 27042287 (2)..... (3).....

Fax..... Mobile 9899912606

E-Mail..... Web.....

No. of Beds in institution NA

Any future expansion plans YES

Any in-house pharmacy in hospital NO

If yes, tick mark the relevant option :

DR. MRS. KIRTI GOEL
B.D.S., M.D.S.
D-14/19, Sector-3, Rohini, Delhi-85
Private Hospital Owned

To serve you better, kindly handover this filled form either by mail or post or by hand at :
Vantage Trade Fairs (P) Limited : 23/21A, East Patel Nagar, New Delhi-110008 (India)

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