

Dr. (Mrs.) ARCHANA SINHA
M.B.B.S., D.G.O., M.D.

OBSTETRICIAN & GYNAECOLOGIST

To Whomsoever

Subject: Acceptance of invitation for Medif

Resi.-cum-Clinic : H-491, Vikaspuri, Delhi-110018

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!

^{Any}
Dr. (Mrs.) ARCHANA SINHA
Sincerely,
M.B.B.S., D.G.O., M.D.
OBSTETRICIAN & GYNAECOLOGIST
Regd. No. 13530

Sign & Stamp

Title Dr. Full Name ARCHANA SINHA
Designation DIRECTOR
Institution SINHA MATERNITY & MEDICAL CENTRE
Contact Details H-491, VIKAS PURI, DELHI-18
Phone No. (1) 28540664 (2) _____ (3) _____
Fax _____ Mobile 9810448679
E-Mail _____ Web _____
No. of Beds in institution 10
Any future expansion plans Yes
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 :
Vantage Trade Fairs (P) Limited : 23/21A, East Patel Nagar, New Delhi-110008 (India)
Telefax : +91-011-45050886
Mail at : info@vantagetradeairs.com