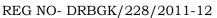
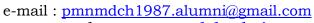


SHRI. B.V.V. SANGHA'S P. M. NADAGOUDA MEMORIAL DENTAL COLLEGE AND HOSPITAL, BAGALKOT – 587101. (KARNATAKA)

ALUMNI ASSOCIATION





web: www.pmnmdch.edu.in



FOURTH ALUMNI MEET ON - 19TH & 20TH JANUARY 2018

REGISTRATION FORM

NAME OF THE ALUMNUS:		DATE:
ALUMNI MEMBER: YES	NO	
NAME OF THE SPOUSE/ACCOMPANYING PERSON: ADDRESS FOR CORRESPONDANCE/PERMANENT ADDRESS TOTAL NO OF PERSONS:		
CITY:	STATE:	
MOBILE:	EMAIL-ID:	
PHONE:	PIN CODE	
		SIGNATURE
BANK DETAILS		NET BANKING DETAILS
DD Should be taken in favor of "P	M N M Dental	Bank: Allahabad Bank, Bagalkot Branch
		A/c No - 50081823110
College & Hospital Alumni Assoc	ciation, Bagalkot"	IFSC Code- ALLA0212548
Payment done by: DD	NET BANKING	CASH
Details: DD number:	Bank & Branch:	Amount:
DD or Net Banking Transaction Details should be sent along with Registration Form on or before 31/12/2017 to the following email id: pmnmdch1987.alumni@gmail.com or WhatsApp to below mentioned No's.		
Dr. Naveen S. 9980679237	Dr.	Mahadevi Hosur – 9902896956,
Dr. Hirnamayi – 9739449334,		

NOTE: ACCOMMODATION FACILITY AT YOUR OWN DISCRETION