



REGISTRATION FORM

ADVANCE ELECTROCARDIOGRAM LEARNING

30TH JUNE 2019

Venue: School of Physiotherapy RK University, Rajkot-Bhavnagar Highway, Rajkot.

NAME: _____

AGE/GENDER: _____ CONTACT NO: _____

ADDRESS: _____

EMAIL ID: _____ DATE: _____

QUALIFICATION: _____

PRESENT EMPLOYMENT: _____

PREFERRED NAME FOR CERTIFICATE: _____

AMOUNT PAID: _____ PARTICIPANT'S SIGNATURE: _____

FOR MORE DETAILS CONTACT

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