

Theme - Redefining Occupational Health, Safety & Wellbeing: Navigating Present Challenges, Shaping Future Solutions

ORGANISED BY

7th - 10th January, 2026 | Padam Banquets & Lawn, Jamnagar, Gujarat

REGISTRATION FORM

| IAOH Member | I Non IAOH Member Ret | ired IAOH Member | PG Students Intern | ational Delegates | | | |
|-----------------|-------------------------------------|---|----------------------------|------------------------|--|--|--|
| *IAOH Membe | rship No | | | | | | |
| *Full Name | *(As required on certificate & | badge) | | | | | |
| *Email | | *Mobile No | | | | | |
| Date of birth | / Ag | e [] Gender - Male | [] Female [] | | | | |
| *Medical Coun | cil Reg No | *Medical Council R | eg State | | | | |
| Organization / | Institution / Nursing Home | | | | | | |
| Address for co | mmunication: | | | | | | |
| *City | *State | Pin Code | Country | | | | |
| *PG Students sh | ould submit the bonafide certificat | e from Head of the Depa | rtment/Institution along v | vith Registration form | | | |
| Accompanying | Person [] YES [] NO | | | | | | |
| Name of Spouse | | | | | | | |
| Name of Childr | en | | | | | | |
| PAYMENT DE | ETAILS | | | | | | |
| Delegate (Amo | ount) | | | | | | |
| No. of Accomp | oanying Person: | Accompanying | Person (Amount) | | | | |
| Total Amount F | Paid | | | | | | |
| Payment Mode | e: UPI [] Cheque [] DD [] | ng Person: Accompanying Person (Amount) | | | | | |
| *PAYMENT TO E | BE MADE BY CHEQUE/ DD IN FAV | OUR OF "Association of | Occupational Health" | | | | |
| UPI/ Cheque/ [| DD/ RTGS/ NEFT Transaction ID | Transaction Date | | | | | |

BANK DETAILS:

Account Name: Association of Occupational Health Account no: 9312896578 / IFSC Code: KKBK0000829 Branch: Meenadevi Bhavan, Town hall road, Jamnagar Bank: Kotak Mahindra Bank

Slignature:_____ Date: _____



SCHEDULE OF FEES

| Category | Up to 15th July 2025 | 16th July 2025 to 31st October 2025 | 1st November 2025 to 31st December 2025 | 1st January 2026 onwards |
|--|-------------------------|--|--|-----------------------------|
| IAOH Member | 7500 | 10000 | 12500 | 15000 |
| Non IAOH Member | 10000 | 12000 | 14000 | 16000 |
| Retired IAOH Member (Age between 65 - 70) | 3750 | 5000 | 6250 | 7500 |
| Retired IAOH Member (Age above 70) | 1875 | 2500 | 3125 | 3750 |
| Accompanying Persons | 5500 | 7000 | 8000 | 9000 |
| PG Students | 4000 | 5000 | 6000 | 6000 |
| PDC Workshops | 2000 | 2000 | 2000 | 2000 |
| International Delegates (US Dollars) | 300 | 350 | 400 | 450 |

CANCELLATION POLICY:

Cancellation of your conference registration can be done by writing an email to the conference secretariat at *registration@iaohoccucon2026.com* clearly stating your registration number in the subject line. The email will have to be sent from the email address you used while registering.

PLEASE NOTE:

- 1. Registration is non-transferable to any attendee
- 2. Cancellations upto 15th Nov, 2025: 50% + GST deducted
- 3. Cancellations post 15th Nov, 2025: No refund
- 4. All refunds will be provided by cheque post 6 weeks of the completion of the conference
- 5. Time stamp of email will be considered as official date of cancellation request

CONFERENCE SECRETARIAT

Dr. Bhavesh Khodadiya

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