



# MATRIX

Initiative for Medical Education

## CME REGISTRATION FORM

Full Name (will reflect on the certificate):

Gender:  Male  Female

Nationality:

Company/ organization:

Email ID:

Contact Number:

Payment Details:  Cash only

Locations for Registration: **Lifeline Medical Centre, Bur Dubai or Venue**

Contact Person : Moin Khan

Mobile Number : +971 504128269

Only Limited Seats are Available. Registration will be closed on 18<sup>th</sup> November

