The Trained Nurses Association of India (TNAI)
Headquarters: L-17, Florence Nightingale Lane, Green Park, New Delhi-110016
Venue: TNAI's CIN & R and ECH, Plot No.37, Knowledge Park-III
Greater Noida, Uttar Pradesh

Passport-Size photo of the candidate

Registration form

Course (tick the appropriate)					
BLS		**ACLS**		**RMNCH+A**	

Name (in block letters)		
Address (in block letters)		
Contact details	Mobile No:	
	Email:	
Personal Details	Age:	Sex:
Educational Qualification		
Designation & address of the institution		
TNAI No.	**(attach the copy)**	
Accommodation details (if required)	Arrival date:	Time:
	Departure date:	Time:
Payment details:	Cash:	Amount
	(mention the receipt number)	
	DD*:	Amount:
	DD No.	
	(mention the receipt number)	
	NEFT/RTGS/IMPS***	*Amount:*
	UTR No.	
	(mention the receipt number)	

Signature of Participant

*DD to be in the favour of "Trained Nurses Association of India", Payable at New Delhi, Registration will be confirmed subjected to the clearance of the DD or cheque.
*** **Bank details for the NEFT/ RTGS/ IMPS:**

Name: The trained Nurses' Association of India	Bank Name: Indian Bank
Branch Name: Hauz Khas, New Delhi	Account Number: 6602721709
IFS Code: IDIBOOOHO19	

Sent the complete forms to:

The Secretary General, TNAI
Central Institute of Nursing & Research, Plot No.37 & 37-1, Knowledge Park-III, Greater Noida-201310
(UP) Tel: 0120-2323659 Email: tnai.cin.ech@gmail.com