

# Registration Form

## TWO DAYS LABORATORY TRAINING PROGRAMME ON TESTING AND QUALITY EVALUATION OF PACKAGING MATERIALS

Dear Sir/Madam

Please register the following nominee for participation in the laboratory training programme on **06<sup>th</sup> & 07<sup>th</sup> December, 2018.**

Name	: (i) _____ : (ii) _____ : (iii) _____
Designation	:
Name of Organization	:
Address	:
Phone No	:
Fax	:
Mail ID	:
Mobile No.	:
Stay During Course	: Residential/Non Residential

Organization membership type : Life/Ordinary/Non Member (Please Tick)

Please find enclosed herewith DD No..... Of Rs.....For registration of .....Nominee/s from our company/organization.

Kindly use photocopy of the form for additional nomination(s)

### Fee:

Rs. 5500/- per person for Non-Members, Rs. 5000/- per person for IIP Members, Rs. 4750/- per person for Life / Patron Members plus GST @ 18% respectively. Fee to be sent by Demand Draft / RTGS or NEFT in favour of “Indian Institute Of Packaging”,

Signature