Industry **Outreach Programme** 

## **Corrugated Fiber Board Boxes**



5<sup>th</sup> September, 2024

**Certificate of Attendance** will be given to each registered participant

#### Why should attend

- Able to correlate the effect of changing testing parameter on the overall packaging system.
- Able to calculate the cost of packaging and to prepare specification for vendors.

Who should attend

All professionals who wish to enhance their knowledge in packaging including

- Packaging Material Manufacturers
- Converters of Packaging Materials
- **Users Industries**

#### **Programme Schedule**

Basics & Types of Corrugated Fibre Board Boxes

Corrugated Fibre Board Box- Testing, Quality Evaluation & Specification

Transport worthiness test of CFB (V.I.R.D)

Selection & optimization of CFB boxes for the issue of UN Certificate

Laboratory Demonstration & Hands on Practice

Mode: Hybrid-Online/Offline

#### **Registration Fees & Payment Details**

| DELEGATE        | INDIAN (INR)       |
|-----------------|--------------------|
| NON MEMBER      | 3,000 + 18.00% GST |
| IIP MEMBER      | 2,700 + 18.00% GST |
| IIP LIFE MEMBER | 2,550 + 18.00% GST |

| BANK DETAILS FOR ONLINE PAYMENT |                               |
|---------------------------------|-------------------------------|
| NAME OF THE BANK                | STATE BANK OF INDIA           |
| BANK ACCOUNT NAME               | INDIAN INSTITUTE OF PACKAGING |
| ACCOUNT NO                      | 36826706851                   |
| IFSC CODE                       | SBIN0002661                   |

For More Details / Information Contact: Mobile: +91-7986366261, +91-9586494842,

E-mail: testing.ahmedabad@iip-in.com; iipahmedabad@iip-in.com



### **REGISTRATION FORM**

# **Industry Outreach Training Programme on Corrugated Fiber Board Boxes**

(Date of Workshop: 5<sup>th</sup> September, 2024)

Please register the following nominee/s for participation in the Workshop

| Name of<br>Participant/s               | : -              |  |
|--|------------------|--|
| Designation                            | : _              |  |
| Name of<br>Organization                | : -              |  |
| E-Mail ID                              | : _              |  |
| Mobile No.                             | : _              |  |
| (Payment shou                          | ıld be           | made through RTGS / NEFT only)   |
| Organization Me                        | embers           | hip Type: Life /Ordinary / Non Member (Please Tick).   |
| Please find enclor<br>for registration | osed he          | erewith payment details/UTR no of Rs of Rs   |
| Kindly use photo                       | сору о           | f the form for additional nomination(s)  |
| Bank Address: K<br>IFSC Code: SBII     | hokhra<br>NOOO20 | k of India; Account No :36826706851  a Mehmedabad Branch, Khokhra Circle, Ahmedabad  661; SWIFT Code: SBININBB  ertificate copy along with the registration form for invoice purpose |
|  |                  | Signature Signature  |