

REGISTRATION FORM

International Conference on Innovative Applications of Chemistry in Pharmacology & Technology (IC-IACPT-2015)

February 06-08, 2015



- P. G. Department of Chemistry, Berhampur University, Odisha, India-760007
- 1. Name:
- 2. Designation:
- 3. Sex: Male/Female
- 4. University/College/Institution/Industry:
- 5. Correspondence E-mail:
- 6. Contact Number:
- 7. Submitting Abstract/Papers: Yes/No/Only Participation
- 8. Type of Presentation: Oral/Poster/None
- 9. Title of Talk /Abstract:
- 10. Whether accommodation is needed? Yes/No
- 11. Accommodation Requested (On Payment)

From date --/--- to

Number of accompanying Person:

- 12. Expected date and time of arrival:
- 13. Food Habit: Veg/Non-Veg
- 14. Registration fee details:

For online Payment

| Transection details: | Amount paid: | Date: |
|----------------------|--------------|-------|
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For offline Payment: Enclosed Amount: DD No.: Date:

Name of Issuing Bank with Code:

Signature of Participant

Place: