CENTRAL POWER RESEARCH INSTITUTE REGIONAL TESTING LABORATORY

3A, INSTITUTIONAL AREA, SECTOR - 62,NOIDA - 201 309(U.P.)
Ph.: 0120 - 2402823,2402058 Fax: 0120 - 2402824
GST No.: 09AAAAC0268P1ZH

REGISTRATION FORM

Seminar on "Recent Trends in Electric Wires and Power Cables Technology" DATE: 19thFebruary 2020

Mr./Ms./Mrs./Dr./Prof.Others(please specify)
Full Name of the Participant
Designation Nationality
Full address of Organization(for Correspondence)
Country: ZIP/PIN Code:
Phone /Fax Nos.:(Please Mention Country & STD Code)
Office: Res(Optional):
Fax: Mobile/Cell:
E-mail: GSTNo
Enclosed is a Demand D raft NodatedFor Rsdrawn onbank/RTGS transaction notowards delegate fee drawn in
favour of "Central Power Research Institute, Noida"
Payable at 'Noida'.
Date:
Note: Kindly mention your Name, Name of the Company and Name of the workshop behind the Demand Draft.
Completely Filled forms& DD shall be sent to: Seminar Convener CENTRAL POWER RESEARCH INSTITUTE REGIONAL TESTING LABORATORY 3A, INSTITUTIONAL AREA, SECTOR - 62,NOIDA - 201 309(U.P.) Mobile:9810803435 Telefax: 0120-2402824 Email: jaiswal@cpri.in/nehaadhikari@cpri.in

CANCELLATIONS & SUBSTITUTIONS:

Registration without payment does not confirm the reservation for the event. Request for cancellations must be received in writing, more than 5 working days before the commencement of workshop. However, Rs 1000/- will be deducted as handling charges. If the fee has been paid in full, substitutions can be made with prior intimation with no extra cost. In case this workshop is cancelled, full refund will be made. CPRI reserves the right to postpone or cancel this event.

 $Sponsors, Co-sponsors \ and \ Exhibitors \ shall \ give \ full \ details \ of \ all \ the \ participants \ in \ this \ format.$

 $Kindly\ use\ separate\ form\ for\ each\ participants,\ download/photocopies\ of\ this\ registration\ form\ is\ acceptable.$

LAST DATE FOR REGISTRATION: 14th February, 2020