

REGISTRATION FORM
"Vermibin
Management and Marketing
of Vermi Products"

10 October, 2018.

Name :

(In Block Letters)

Designation:

Age :

Sex :

Institution:

Address for Communication:

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E-mail :

Phone :

Mobile:

Category of the Participants : Faculty/Scientist/Scholar/Farmers

Accommodation Required : Yes/No

No. of accompanying Person:

Registration details:

Amount (Rs)

DD No.....

Bank

Date.....

Place

Date

Signature of the participant

Place

Photocopies