

# TOGETHER INDIA-JAPAN CONFERENCE

9.00 am, February 16, 2019 Hotel The Lalit, Andheri (E), Mumbai



### Participant's Personal Record for Foreign Delegates

Notes: Please complete in English using block letters. Please write your name and date of birth **exactly** as **indicated** in your passport. Please tick with (X) mark.

Name in Full (As mentioned in the Passport)													
Mr./Mrs./Miss/											Photo	of Delegate	
											1 11000	or Deregate	
Nationality Cou				Cou	Country of Residence			Date of Birth					
								Day	Month Year				
	1		1		1								
Sex	M	F S			Status						Others		
Residential Addre					ess		Сс				ontact Details		
										Те	el:		
							Fax:			x:			
										e-ı	mail:		
Passport Details (Passport should be valid						. ,					the date y	our arrival	
in India)													
Passport Number					Date of Issue				Date of Expiry				

### Representing AOTS Alumni Association/Society

N	lame of the Alumni Association		
Address of Alumni Association (Mailing Add			ess)
	Tel:		Fax:
	e-mail:		
Present position in the Alumni Association			

Please Send the Filled Registration Form along with the cheque/DD in favour of AOTS Alumni Association of Western India to:

A 301, India Printing House, 42. G. D. Ambekar Road, Wadala, Mumbai - 400031 Bank Details: Corporation Bank, Branch: Wadala

Account No: 520141001624435: IFSC Code: CORP0000106: MICR Code: 400017020

GST Number: 27AAATA6453F1ZW

In case of Online Transfer, please furnish UTR number for NEFT transaction to our email. Tel: 91-22-24161967, E-mail: <a href="mailto:aaawister@gmail.com">aaawister@gmail.com</a>; <a href="mailto:silverjubilee@aaawi.org">silverjubilee@aaawi.org</a>



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## **Declaration**

c)Local transport facility

d)Information on site seeing etc.

I hereby declare that all the information stated above is true and complete, and I promise that AWI.

I will abide by and adhere to all the regulations and schedules of the 25 years celebration of AA I am physically fit to attend the convention and do not suffer from any temporary or permanent disease or disability.
Kindly register the above said delegate for forth coming conference and send us the confirmation. We release the payment of Rs towards the delegates nominated.
Mode of Payment adopted: (tick the appropriate box and fill in the details)  - By CDD:
- By DD: By Electronic Transfer:
Authorised Signatory and Company Seal
Name & Designation Company Seal/ Rubber seal
Note:
Services Offered: Delegates visiting for the One Day Conference may need additional services from our end. You are solicited to spell out the kind of services anticipated. The services utilized by you shall be at the actual cost charged by the respective service providers.
Services such as:
a)Hotel Booking for your stay in Mumbai
b)Pick up and Drop services from and to Airport