



APPLICATION FORM

Dear Sir / Madam,

Please register the following nominee(s)* for participation in the

Training Programme on

"Testing and Quality Evaluation of Packaging Materials & Packages"

21st - 22nd March, 2024 at Indian Institute of Packaging, Kolkata

Our Demand Draft for **Non Member Rs.7,788.00 / Ordinary Member Rs. 7,009.00 / Life / Patron Member Rs.6,620.00** per participant is enclosed**

Name***MR / MS : _____

Father's Name : _____

Company Name : _____

Designation : _____

Address : _____

Company GST No.: _____ Phone/Fax: _____

E-mail: _____ Mob No. _____

Is organization Member of I.I.P.
Life/Patron/Ordinary

Yes ☐

No. ☐

Principal products produced/used: _____

Packaging materials used: _____

Date:

Designation:

Signature:

Address of sponsored: _____

*Kindly use typed/photocopy of the forms for additional nomination(s).

Demand Draft / Cheque / Online should be drawn in the name of 'Indian Institute of Packaging**' Only.

Bank Name: State Bank of India

Account no 11334345117

IFS Code: SBIN0007816

***If two or more nominations for Non Member Companies from the same organization Concession of Rs.500/- Per participant is admissible.

▪ **Please send your nomination to:**

Indian Institute of Packaging

Block – CP – 10, Sector – V, Salt Lake City, Bidhan Nagar, Kolkata – 700 091.

TEL: 033 - 2367 0763/ 2367 9561 / 2367 6016 CELL - 8017219939.

Email: iipkolkata@iip-in.com; adminassistantiipkolkata@iip-in.com ; Website: www.iip-in.com