

Registration Form

CTDDR-2013: Drug Development for Orphan/Neglected Diseases

February 26-28, 2013

CSIR - Central Drug Research Institute, Lucknow

Title

Name

Address

Phone

Mob.

E-mail

- I intend to participate in the symposium
- I intend to make a poster/ oral presentation
- I am enclosing the registration amount
- I would like to have accommodation (guest house/hotel)
- I have made online registration and paid the fee by credit card / debit card.

Amount..... Cheque/Draft No.

Date.....

Name of Bank.....

Date:/..../.....

Signature

