

NCRHC - 2015



National Conference on Reproductive Health Challenges: Issues and Remedies

September 11-13, 2015

The IIS University, Jaipur

ACCOMMODATION FORM

Prof./Dr./Mr./Mrs./Miss
First Name Middle Name Last Name

Designation

Institution

Mailing Address

Tel. (with STD code) Mobile.....

Fax E-mail

Travel details

Arrival Date.....Time.....Train/Flight No.....Train/Flight Arrival Time.....

Departure Date.....Time.....Train/Flight No.....Train/Flight Departure Time.....

Do you need accommodation to be arranged by NCRHC-2015 Secretariat? : Yes () No ()

If yes, please indicate the category of accommodation preferred:

Type of accommodation: A () B () C () D () E () Check-out Time: 12.00 Noon

If you wish to share a room with another participant, kindly indicate name

Demand Draft/Multicity Cheque Number..... Dated

Amount (Rs.) Drawing Bank

Date..... Signature.....

Demand Draft/Multicity Cheque shall be drawn in favour of 'The IIS University' payable at Jaipur and send to the following address: The Organizing Secretary, NCRHC-2015, Department of Zoology, The IIS University, ICG Campus, Gurukul Marg, SFS, Mansarovar, Jaipur – 302020.