



**Two day Technical Seminar on 26<sup>th</sup>-27<sup>th</sup> March, 2018-  
New Delhi**

**REGISTRATION FORM – SPEAKERS/ EXHIBITORS**

**CONTACT DETAILS**

**Names of Speakers / Exhibitors** : .....

**Company's Name** : .....

**Designation** : .....

**Address** : .....

**Mobile** :.....: **Phone**:.....: **Fax** .....

**Title of paper/ Presentation:** .....

.....

**REGISTRATION FORM - DELEGATES**

**CONTACT DETAILS**

**Names of Delegates** : .....

**Company's Name** : .....

**Designation** : .....

**Address** : .....

**Mobile** :.....: **Phone**:.....: **Fax** .....

**PAYMENT MODE:**

Cheque / DD in favour of **ALL INDIA DISTILLERS' ASSOCIATION**, payable at New Delhi.

For the Amount of Rs. .... No. of Delegates /Speakes ----- Total Nos. ....

(For Online remittance : **Beneficiary Name** : All India Distillers' Association, **Beneficiary Account No.** 20056913993, **Bank Key** : 110010015, **IFSC Code** : ALLA0210615, **Bank Name** : Allahabad Bank, Nehru Place Branch, Rajlok, 24, Nehru Place, Delhi-110019, India., **Swift Code** : ALLAINBBRPN)

**NAME AND SINGNATURE OF THE COMPANY REP.**

**Note** : Please send the completed form to AIDA office at the following address : 805, Siddharth, 96, Nehru Place, New Delhi – 110 019 Email : [aida@aidaindia.org](mailto:aida@aidaindia.org) [aida.newdelhi@gmail.com](mailto:aida.newdelhi@gmail.com) Website : [aidaindia.org](http://aidaindia.org)