

MSWM 2016

Conference on Municipal Solid Waste Management

Conference E mail: mswm2016@gmail.com; mail2sfd@gmail.com

REGISTRATION

1. Name _____	Stamp size photograph
2. Designation _____ Mobile _____	
3. Address _____	

4. Telephone/Fax Nos. _____

5. E.Mail _____

6. Presenting Poster Yes / No Title _____

7. Presenting Paper Yes / No

8. Title of the paper

Enclosed: Abstract / Paper (e –version and hard copy):

(Please ensure CD is virus free)

9. Details of Registration fee: Category: Youth from an academic institution _____

(Need to attach a copy of Academic Organisation – ID card, proof of studentship)

Representative from NGO _____

Delegates: Registration fee Rs 2000, Details of Demand draft:

Date: _____

Date: _____ Place: _____

I agree to attend all sessions and take active part in the interactive sessions

Signature

Date

Contact Details:

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