

REGISTRATION

Name of the Participant/s :

Contact Address :

Phone :

If sponsored, sponsoring
agency's address :

Fax :

E-mail :

Preferred dates for training (give 3 options)

Interested in:

1 day 2 days 4 days programme
(Tick whichever applicable)

DDNo..... Amount..... Rs

Signature of sponsoring authority

Payment shall be made by DD in favour of:

COCONUT DEVELOPMENT BOARD payable at Aluva

Mail the Registration form along with prescribed registration fee to

TECHNOLOGY DEVELOPMENT CENTRE, COCONUT
DEVELOPMENT BOARD, Keenpuram, South Vazhakulam, Aluva-
683105 Kerala. Email:citaluva(a)gmail(dot)com