

Registration Form



ISAP & NMPB presents
**First International Buyer Seller Meet & Conference on Herbal &
Medicinal plants at International
AROGYA**



October 28, 2007 at Pragati Maidan, New Delhi

Name of the Company _____

Names of delegates (1) _____ (2) _____ (3) _____

(4) _____ (5) _____ (6) _____

Address _____

Phone no _____ Mobile no _____

Category of participants, you belong (please tick on appropriate categories given below)

- | | | |
|---|---|---|
| (1) Health food producer & processor <input type="checkbox"/> | (2) Consumer Healthcare product manufacturer <input type="checkbox"/> | |
| (3) Manufacturer <input type="checkbox"/> | (4) Exporter/Importer <input type="checkbox"/> | (5) Medical Practitioner <input type="checkbox"/> |
| (6) Retailer <input type="checkbox"/> | (7) Media/Publisher <input type="checkbox"/> | (8) Consultant <input type="checkbox"/> |
| (9) Buyer * <input type="checkbox"/> | (10) Seller * <input type="checkbox"/> | (11) others <input type="checkbox"/> |

[Please specify, in case of others category _____]

Category of participants, you would like to meet

- | | | |
|---|---|---|
| (1) Health food producer & processor <input type="checkbox"/> | (2) Consumer Healthcare product manufacturer <input type="checkbox"/> | |
| (3) Manufacturer <input type="checkbox"/> | (4) Exporter/Importer <input type="checkbox"/> | (5) Medical Practitioner <input type="checkbox"/> |
| (6) Retailer <input type="checkbox"/> | (7) Media/Publisher <input type="checkbox"/> | (8) Consultant <input type="checkbox"/> |
| (9) Buyer * <input type="checkbox"/> | (10) Seller * <input type="checkbox"/> | (11) others <input type="checkbox"/> |

[Please specify, in case of others category _____]

(* Intended buyer and seller of herbal & Medicinal Plants or products)

Tariff

Delegate fee: – Before October 15, 2007 – INR 1800/- per delegate,

Late registration Fee– INR 3000/- per delegate

Foreign Delegate – USD 100/- per delegate

Discount: 20% discount for student/farmer or in case of group participation (three or more than three delegates)

Advertisement particulars: –

Size of Advertisement _____ Type– Colored ☐ or Black & White ☐

Location of Ad–

Back Cover Page ☐ 1st Opening Page ☐ Front Inside Page ☐ Back Inside Page ☐ Any location ☐

Payment details:

Total Amount _____

Mode of Payment– Cash ☐ Cheque ☐ Draft ☐

Cheque/Draft Details _____

The participation fee may kindly be sent by cheque/DD in favour of 'INDIAN SOCIETY OF AGRIBUSINESS PROFESSIONAL' payable at New Delhi. No payment will be accepted through cheque after October 20, 2007

Contact

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