

REGISTRATION FORM

Please fax back to +91 (11) 2460 8503. Booking Hotline +91 (11) 2460 8524

All delegates and any accompanying persons are required to complete the registration form in full. Please photocopy this form for additional delegates. You may register by fax or email using this Registration Form.

I wish to register the following official from our organisation to GAMP Shanghai 2013

FIRST NAME:																					
SURNAME:																					
TITLE:											POSITION:										
ORGANISATION:																					
ADDRESS:																					
POSTCODE:											COUNTRY:										
SECTOR:																					
TEL:											MOBILE:										
FAX:																					
EMAIL:																					

PAYMENT OPTIONS: Please indicate your payment method:

<input type="checkbox"/>	Bank Transfer: Kindly send us proof of payment. Indian Overseas Bank, 20, Inst. Area, Lodhi Road, New Delhi –110003, India						
	<table border="0"> <tr> <td>A/c No. : 149801000029791</td> <td>Account Name : All India Management Association</td> <td>Branch Name : Lok Kala Manch</td> </tr> <tr> <td>IFSC Code: IOBA 0001498</td> <td>Swift Code No. IOBAINBB001</td> <td>MICR No. : 110020046</td> </tr> </table>	A/c No. : 149801000029791	Account Name : All India Management Association	Branch Name : Lok Kala Manch	IFSC Code: IOBA 0001498	Swift Code No. IOBAINBB001	MICR No. : 110020046
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PARTICIPATION FEE

- Delegate Fee per participant : INR equivalent to USD 7000 per Participant
- Early Bird Discount : INR equivalent to USD 500 discount per participant for registrations received along with participation fee by **30th November'12**
- Group Discount: INR equivalent to USD 6500 per Participant on group registration of 3 or more delegates
- Service Tax: 12.36% will be charged on the participation fee.

Service Tax Regn. No. of AIMA : AAATA 1644 AST001

PAN no. of AIMA : AAATA 1644 A

NOMINATING AUTHORITY

Name : _____

Position: _____

Organisation: _____

Telephone: _____

Mobile: _____

Fax: _____

Email: _____

Signature: _____

Date: _____

CONTACT INFORMATION

Tel: +91 (11) 2460 8524

Fax: +91 (11) 2460 8503.

Contact Persons :

Mr Bijoy Philip
Mobile : +91 – 98189 77980
email bphilip@aima-ind.org

Mr Nitin Saxena
Mobile : +91 – 98116 75559
email nsaxena@aima-ind.org

Mailing Address:
All India Management Association
Management House
14, Institutional Area, Lodhi Road
New Delhi – 110003. India.

TERMS AND CONDITIONS

Registrations are subject to the following terms and conditions:

- 1.Registrations are confirmed upon receipt of payment.
- 2.VAT will be charged where applicable.
- 3.Bank or any other Charges will be extra on remittances.
- 4.The programme is correct at the time of going to print. All India Management Association (AIMA) reserves the right to postpone events or amend the programme if necessary.
- 5.This order form constitutes a non-refundable binding contract and firm commitment to AIMA.
- 6.Hotel Booking is made by AIMA from 13th January, 2013 from 1200hrs till 1200hrs on 19th January, 2013. Delegates arriving earlier or staying after the programme will have to bear additional room charges.
- 7.The accommodation for the delegates are booked at **Radisson Blu Hotel Shanghai New World**, 88 Nanjing Road (W), Shanghai 200003, China
- 8.**The registration fee includes** the course fee, study material, cost of accommodation from 13-19 January, 2013 (06nights), company visits as in itinerary, lunches, dinners as per itinerary.
- 9.**The registration fee does not include** Airfare, VISA Charges, Airport Taxes, Overseas Medical Insurance, Airport Transfers, Porterage charges, Personal Expenses such as Telephone Calls, laundry, Soft/hard drinks, use of mini bar etc.

CANCELLATION POLICY

Cancellations are not accepted and delegate fee are non-refundable, however substitutions are permitted and must be received in writing no later than 21 days before the start of the programme. All delegate fees will need to be paid in advance, Visa letter will be issued only after receipt of payment.

I confirm that I have read and agree to the Cancellation Policy and the Terms and Conditions:

NOMINATING AUTHORITY

Name : _____

Signature: _____

Designation: _____

Organisation: _____

Date: _____

Email: _____