REGISTRATION FORM

Two Day International Workshop on

Current Issues and Trends in Airports and ATM Systems

April 9 & 10, 2007

NAME: _____

_____

DESIGNATION: _____

ORGANIZATION: _____

MAILING ADDRESS:

_____

_____PIN_____

TELEPHONE :(Off)._____ (Res.)_____

FAX: _____

EMAIL ADDRESS: _____

HIGHEST QUALIFICATION: _____

EXPERIENCE: _____ Years   **AeSI Membership Number**: _____

IIT Guest House accommodation required?*   YES/ NO

PAYMENT: Draft No.:_____   Dt._____
for Rs. 6000/- in favour of **" Registrar IIT Bombay (CEP Account)"**, payable at IIT **Bombay.**

Members of *Aeronautical Society of India* should forward their applications through Mr. **Keshava Sharma, Hon. Secy. AeSI Mumbai Branch,** to avail of the reduced registration fees. E-Mail: asi_mumbai@rediffmail.com
Telefax: +91-(0)22-26158017 (11- 00 AM to 2- 00 PM)

DATE: **Signature of the Applicant**

* Guest House bill to be settled directly by the participant