



SUSKAN CONSULTANTS PRIVATE LIMITED

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COMMON WORKSHOP FORM

SUSKAN WORKSHOPS

Date: _____ Venue: _____, Kolkata

Delegate Fee: Please tick the relevant category:

- Individual Rs. _____ +12.36% Services Tax = Rs. _____
Early Bird Rs. _____ +12.36% Services Tax = Rs. _____
Group (for 3 and above) 10% Discount.

The following participants(s) would attend:

Table with 2 columns: Name, Designation. Rows 1, 2, 3 with blank lines for input.

(For additional nominations, please use a photocopy of this form)

Enclosed please find our Cheque/DD No. _____ Dated _____

For Rs. _____ drawn in favour of "SUSKAN CONSULTANTS PVT LTD." Towards delegate fee.

Nominated By:

Name _____ Designation _____
Company _____
Address _____
City _____ Pin _____
Telephone (O) _____ Mobile _____
Fax _____ E-mail _____

Signature _____ Date _____

(Since there are limited seats, Pre- Registration is a must)