**Registration form** – Annual Conference 2023

(Jamshedpur 1, 2 - December 2023)

Mail the filled form tooffice@isqnet.org and isq.annualconference@gmail.com (Early bird registration is applicable upto 31st October 2023)

**Note:**

For self- nomination you may fill only the relevant columns.

For nominations from the organisations, please provide all the details below**.**

|  |  |  |
| --- | --- | --- |
| **Contact person:** | **Email ID:** | **Mobile:** |
| **Name of the organisation:**  |
| **GST No.:** | **Billing address:** |
| Sr. No. | Name | Designation | Mobile | E-mail ID | Registering for factory visit (Y/N) |
|  |  |  |  |  |  |
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**NOTE:**

* **Fee mentioned are per person. GST is extra at 18%.**
* We discourage cancellation of nomination; however, change in nomination is acceptable.
* Change of Nomination needs to be done through a written request to the contact person below.

**Fee details in INR per person(GST is extra at 18%)**

|  |  |  |
| --- | --- | --- |
| Early Bird - **before 31 10 2023** | Regular | Students |
| Non-members | Members | 3 or more delegate registrations from same organisation | Non-members | Members | 3 or more delegate registrations from same organisation |
| 11,000/- | 10,000/- | 10,000/- | 12,000/- | 11,000/- | 11,000/- | 4,000/- |

(Fees covers participation in two-day annual conference, lunch and tea breaks, participation in awards night and dinner on 1st December and factory visit)

**Account details for payment**

**Beneficiary Bank Account Name:** Indian Society for Quality **Name of the Bank**: HDFC Bank **Branch**: Greater Kailash 2, New Delhi

**Bank Account No.:** 00272000001288 **IFSC Code:** HDFC0000027 **GSTIN No.:** 07AAATI0276N1ZG

**Billing address:** C-585, Z-113, DEFENCE COLONY, NEW DELHI, South Delhi, Delhi, 110024

**Payment information: Account details for Cheque/ RTGS/ NEFT transfer**

|  |  |  |  |
| --- | --- | --- | --- |
| **Cheque /DD/NEFT/RTGS ref. Number** | **Name of the Bank** | **Date** | **Amount (Rs)** |
|   |   |   |   |

**Nominating Authority**:

Name: ------------------------------------------------- Designation: ----------------------------------

Organization: -------------------------------------------------------------------------------------------

City: --------------------- Pin: ------------ Phone: --------------------- Email: ----------------------

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For more details, please contact**

Prabhakar Shettigar (8012580850), Dr. Pankaj Kumar (9234531259) or Nishith Sinha (9234500734)

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