

Application Form

Company name and address you provide here will be printed on your taxable invoice (not editable after Invoice is generated). Write in BLOCK letters only. Name you provide here will be printed on your participation certificate.

Contact information of attendees :

Full Name:

Designation:

Department:

Organization:

Official Address:

Official Address:

City:

 PIN:

 State:

 Email:

STD

 Phone

 Ext

 Mobile

If you are registering first time, please provide your Company's :-

PAN :

TIN or Service Tax Number

Additional attendees :-

Full Name & Email id:

Full Name & Email id:

Full Name & Email id:

Full Name & Email id:

To confirm your registration send the scan copy of cheque or electronic fund transfer proof along with the registration form by email. Original cheque can be either submitted at training venue or you may send by one of the following couriers only (Professional / DTDC / First Flight / DHL / FedEx / Blue Dart / Track on / Speed Post) to Mr. George Mathew, USP India, Plot No D6 & D8, ICICI Knowledge Park Genome Valley Shamirpet Turkapally Hyderabad 500 078 Telangana. Ph 040 – 4448 8934 Email getindia@usp.org

Thank you and best regards

Dr. Ashok Dang
Sr. Director - Marketing and Technical Services
United States Pharmacopeia India Private Limited
India Pvt.Ltd.

Mr. Anindya Sarangi
Director & Business Head
American Society for Quality

Plot No D6 & D8 IKP Knowledge Park
Jasola

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