



Textile Institute of Pakistan

REGISTRATION FORM

(FOR SHORT COURSES IN TEXTILES)

Name of the Company: _____

Address: _____

Email: _____ Fax: _____ Tel: _____

Name of the Nominee(s): _____

1. Mr./Miss/Mrs. _____
2. Mr./Miss/Mrs. _____
3. Mr./Miss/Mrs. _____
4. Mr./Miss/Mrs. _____

Program Code(s)/Dates: _____ Week/Days: _____

All 20 Programs 31.03.2008 to 16.08 2008

Total Man Days (No of Nominees x No Of days): _____

Total payment due @ Rs. 2000/person/day: Rs. _____

Mode of Payment (Please tick): 1. Draft attached. 2. Cheque on arrival at city campus

Name of the person forwarding this registration form: _____

Designation of the person forwarding this form: _____

Date:

Seal & Signatures