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INDIAN INSTITUTE OF PACKAGING

APPLICATION FORM

Dear Sir, Please register the following nominee(s)* for participation in the

One Day National Workshop On "PACKAGING OF FRESH & PROCESSED FOODS"

FOR MICRO, SMALL AND MEDIUM ENTREPRENEURS' OF ASSAM & NE

19th DECEMBER (SATURSDAY), 2015 AT RADISSON BLU HOTEL, GUWAHATI

Name: _____

Designation: _____

Company Name: _____

Address: _____

Telephone/Fax: _____

E-mail: _____

Principal products produced: _____

Packaging materials used: _____

Date:

Designation:

Signature

*Kindly use typed/photocopy of the forms for additional nomination(s).

** Please send your nomination to

Indian Institute of Packaging, Kolkata Centre
Block – CP – 10, Sector – V, Salt Lake City,
Bidhan Nagar, Kolkata – 700 091.

TEL: 033 - 2367 0763/ 2367 9561 / 2367 6016 CELL - 8017219939.

Email: iipkolkata@iip-in.com; iipcal@cal.vsnl.net.in;