

HARTI Colloquium 2016

Registration Form

(Please confirm by 04 March 2016)

Name: (Rev., Dr., Mr., Miss, Ms.).....

Affiliated Institute:

Designation:

Address:

Tel:

Fax:

Email:

Participation category: Author/presenter/participant/other

Signature:

(Not necessary for email communication)

Date:

Please mail/fax/email this to:

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