

'Networking Drug Discovery & Pharm Innovations'

Participant Registration

Please enroll me for the '*Networking Drug Discovery & Pharmaceutical Innovations*' workshop of the Drug Discovery Network being organized at Bengal College of Pharmaceutical Science and Research, Durgapur.

Participant's details (To be filled-in by the participant)		Action (By the host-coordinator)	
Name	Dr/Mr/Ms/Mrs:	Regd No: BCPSR-	
Date of Birth		(allot on first come first serve basis, beginning with #1)	
Designation/ Class		Session (V Appropriately)	I: Feb 06/ 10 am
Institution			
Email id			
Mobile			
Remittance	Rs 150/200 (Strike-off whichever not applicable)		
(Signature with date)		(Signature with date)	

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(Participant's Copy)

Dear Dr/Mr/Ms _____ You have been registered for the above workshop in Session I/II/III. Your registration number is BCPSR- _____. Please report at the designated venue 15 minutes before the scheduled time along with this slip.

(Host-Coordinator)