

World Congress on **BIOTECHNOLOGY**

Accommodation Form

- 1) Prefix : Prof () Dr () Mr () Mrs () Ms () Sex : M / F
- 2) Name : _____
- 3) Institute & Speciality : _____
- 4) Correspondence Address : _____

- 5) Country : _____ 6) State : _____
- 7) City : _____ 8) Pin code : _____
- 9) Fax : _____ 10) Mobile : _____
- 11) E-mail: _____

	Price (per head per day)
<input type="checkbox"/> Faculty	₹ 3,500
<input type="checkbox"/> Research Scholars	₹ 1,000
<input type="checkbox"/> Students	₹ 800

Payment Details

Cheque / DD. No _____
Total Amount _____
Drawn at (Bank) _____
Dated _____

Note: Send your Cheque / DD in favour of “**CONVENOR-ANALBIOANAL**” payable at Hyderabad

Conference Secreterait:

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E-mail: accdn.biotechnology2011@omicsonline.org,
biotechnology2011@omicsonline.org

For any further information or assistance kindly call on:
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